

# **EXHIBIT 19**

## **DECLARATION OF RUFUS JENKINS**

**Part 1: Declaration – Attachment H, pages 1 – 148**

**DECLARATION OF RUFUS JENKINS  
PURSUANT TO 28 U.S.C. §1746**

I, Rufus L. M. Jenkins, have personal knowledge of the facts and matters discussed in this declaration and, if called as a witness, could and would testify as follows:

1. I am a citizen of the United States and over the age of eighteen (18) years old. I am employed by the Federal Trade Commission (“FTC”) as an investigator in the Bureau of Consumer Protection’s Division of Financial Practices. My office address is 600 Pennsylvania Avenue, NW, Mail Stop CC-10232, Washington, DC 20580.
  2. I have worked with the FTC since April 2019. Previously, I worked for eight years in a forensics practice at one of the Big Four public accounting firms. I earned my Master of Accountancy and Master of Business Administration from Mercer University.
  3. At the FTC, my responsibilities include investigating parties suspected of engaging in unfair or deceptive acts or practices in violation of the FTC Act and any other laws or rules enforced by the FTC. In the normal course of carrying out my investigative responsibilities, I regularly use Internet search engines, electronic databases, spreadsheet software, and a variety of other software-based investigative and organizational tools. I regularly review a variety of records, including bank data, website registration data, and telecommunications records, engaging in analysis for indicators of fraudulent activity.
  4. I am a licensed Certified Public Accountant (“CPA”). To become a licensed CPA, I passed the Uniform CPA Examination®. The CPA Exam consists of four, four-hour sections: Auditing and Attestation, Business Environment and Concepts, Financial Accounting and Reporting, and Regulation. Examples of content areas within exam sections include Performing Further Procedures and Obtaining Evidence, Economic Concepts and Analysis,

1 Financial Statement Accounts, and Business Law. Further, I had to meet rigorous  
2 requirements concerning education, experience, and ethics. To maintain my permit to  
3 practice, I must complete no less than eighty hours of acceptable continuing professional  
4 education (“CPE”) during the two-year period preceding the date my license expires.

5 Representative subject areas of acceptable continuing education credits include Accounting  
6 and auditing, Computer Science, Statistics, Economics, and Business Law.  
7

8 5. I am also a Certified Fraud Examiner (“CFE”). To become a Certified Fraud Examiner, I had  
9 to pass an exam which tested four subject areas: (1) fraud prevention and deterrence; (2)  
10 fraudulent financial transactions; (3) fraud investigations; and (4) legal elements of fraud. To  
11 maintain my CFE Credential, I am required to earn at least twenty hours of CPE every 12-  
12 month period. At least ten of these hours must relate directly to the detection and deterrence  
13 of fraud and two hours must relate directly to ethics. The other eight are left to individual  
14 choice between the two preceding fields of study and the exam subject areas.  
15

16 6. As part of my duties at the FTC, I have been assigned to work on the FTC’s investigation of  
17 Lead Express, Inc. (“Lead Express”); Camel Coins, Inc. (“Camel Coins”); Sea Mirror, Inc.  
18 (“Sea Mirror”); Naito, Corp.; Kotobuki Marketing, Inc. (“Kotobuki Marketing”); Ebisu  
19 Marketing, Corp. (“Ebisu Marketing”); Hotei Marketing, Inc. (“Hotei Marketing”); Daikoku  
20 Marketing, Inc. (“Daikoku Marketing”), (collectively, the “Corporate Defendants”); La Posta  
21 Tribal Lending Enterprise, also doing business as Harvest Moon Financial, Harvest Moon  
22 Loans, Gentle Breeze, Gentle Breeze Online, and Green Stream Lending (the “Tribal  
23 Defendant”); Takehisa Naito; and Keishi Ikeda. Throughout this declaration, I will refer to  
24 the subjects of the FTC’s investigation collectively as “Defendants.”  
25

- 1       7. During the course of this investigation, I have acquired personal knowledge and information  
2       about the facts stated here, and if called, would testify to the same. My conclusions are based  
3       on my investigation of Defendants, which included my review of consumer complaints about  
4       the Defendants' business practices and review of documents obtained by the FTC, including,  
5       but not limited to, corporate records, website and domain registration documents, telephone  
6       records, and financial records.
- 7       8. During the investigation, the FTC obtained records and information from a number of  
8       sources through compulsory process, by issuing a Civil Investigative Demand ("CID"), and  
9       other means. The records and information include, but are not limited to, consumer  
10      complaints, corporate filings, website and domain registration documents, telephone records,  
11      and financial records. Throughout this declaration, I refer to Defendants' various financial  
12      accounts using the following protocol: an abbreviated trade name (in whose name the  
13      particular account is held), bank initials, and the last four digits of the account number.
- 14      9. One of my duties is to serve as document custodian for the FTC in this investigation. As the  
15      custodian of documents and information collected in the course of this investigation, I  
16      maintain all such evidence in my custody and control, either on a secure FTC server or in a  
17      locked filing cabinet in my office. Personal information, such as social security numbers and  
18      account numbers, have been redacted from the attachments to this declaration in order to  
19      protect the privacy of consumers and individuals associated with the Defendants. Copies of  
20      any documents referred to in my declaration are available without information obscured for  
21      viewing upon request. Below, I describe those documents and information the FTC gathered  
22      during this investigation, and, in some instances, present my analysis of this evidence.
- 23
- 24
- 25
- 26

1           **I. BUSINESS FORMATIONS AND RECORDS**

2       10. The Corporate Defendants were created by documents filed with either state governmental  
 3           agencies in California or Nevada, and the Tribal Defendant was established pursuant to tribal  
 4           resolutions. Although incorporated in Nevada, Lead Express and Kotobuki Marketing  
 5           registered with California to transact business within the state.

6       11. Although not all images are available online, California allows the public to access and  
 7           download company formation and amendatory documents from its state-run website.<sup>1</sup>  
 8           Nevada allows ordering these same records through its Commercial Recordings Division in  
 9           the Office of the Secretary of State (“SOS”).<sup>2</sup> In contrast, the Tribal Defendant’s organizing  
 10          documents and entity records were not readily publicly available, but they submitted them to  
 11          third parties to establish financial accounts.

12       12. During the investigation, the FTC obtained company records from California and Nevada in  
 13           the manner described in the preceding paragraph. The FTC acquired company records of the  
 14           Tribal Defendant through compulsory process issued to financial institutions. True and  
 15           correct copies of the Corporate and Tribal Defendants’ organizational and amendatory  
 16           documents are summarized in Table 1 below.

17           **Table 1**

<b>Entity Name</b>	<b>Attachment</b>	<b>State</b>	<b>Formation Date</b>	<b>Status</b>
Lead Express, Inc.	<b>A</b>	CA	Sept. 24, 2013	Surrendered
		NV	Jan. 25, 2011	Active
Camel Coins, Inc.	<b>B</b>	CA	Nov. 8, 2011	Dissolved
		NV	Mar. 19, 2012	Active
Sea Mirror, Inc.	<b>C</b>	CA	Feb. 8, 2013	Dissolved
		NV	Feb. 21, 2012	Active
Naito Corp.	<b>D</b>	CA	July 28, 2006	Dissolved
		NV	Oct. 5, 2018	Active
Kotobuki Marketing, Inc.	<b>E</b>	CA	July 13, 2016	Surrendered
		NV	Dec. 4, 2014	Active

26       <sup>1</sup> California’s business database is available at <https://businesssearch.sos.ca.gov/>.

2       <sup>2</sup> Nevada’s business database is available at <https://esos.nv.gov/EntitySearch/OnlineEntitySearch>.

1	Ebisu Marketing, Inc.	F	CA	Mar. 3, 2010	Active
2	Hotei Marketing, Inc.	G	CA	Mar. 6, 2013	Active
3	Daikoku Marketing, Inc.	H	CA	Apr. 30, 2013	Active
4	La Posta Tribal Lending Enterprise	I	Tribal	Apr. 21, 2010	Active

13. A review of the Tribal Defendant's organizing documents in **Attachment I** shows that it has  
 4 also registered the following trade names: Harvest Moon Financial, Gentle Breeze, and  
 5 Green Stream Lending.

## 7 II. INDIVIDUAL DEFENDANTS

### 8 A. Takehisa Naito

9 14. Takehisa Naito is connected to each of the Corporate Defendants as either an owner, director,  
 10 or officer, and usually all three. Table 2 below summarizes the connections between  
 11 Takehisa Naito and the Corporate Defendants.

13 **Table 2**

Title	Company	Source Record	Att.
Owner	Camel Coins, Inc.	Camel Coins WF – 9898 Sig. Card	Att. DDD
	Daikoku Marketing, Inc.	Daikoku Marketing WF – 6881 Sig. Card	Att. EEE
	Ebisu Marketing, Corp.	Ebisu Marketing WF – 6154 Sig. Card	Att. GGG
	Hotei Marketing, Inc.	Hotei Marketing WF – 3413 Sig. Card	Att. HHH
	Kotobuki Marketing, Inc.	Kotobuki Marketing WF – 9062 Sig. Card	Att. III
	Lead Express, Inc.	Lead Express WF – 9880 Sig. Card	Att. JJJ
	Naito, Corp.	Naito Corp WF – 9539 Sig. Card	Att. KKK
	Sea Mirror, Inc.	Sea Mirror WF – 8354 Sig. Card	Att. LLL
Director	Camel Coins, Inc.	NV Corporate Records	B
	Ebisu Marketing, Corp.	CA Corporate Records	F
	Hotei Marketing, Inc.	CA Corporate Records	G
	Kotobuki Marketing, Inc.	NV Corporate Records	E
	Lead Express, Inc.	CA, NV Corporate Records	A
	Naito, Corp.	NV Corporate Records	D
	Sea Mirror, Inc.	NV Corporate Records	C
Chief Executive Officer	Camel Coins, Inc.	CA Corporate Records	B
	Daikoku Marketing, Inc.	CA Corporate Records	H
	Ebisu Marketing, Corp.	CA Corporate Records	F
	Hotei Marketing, Inc.	CA Corporate Records	G
	Kotobuki Marketing, Inc.	CA Corporate Records	E
	Lead Express, Inc.	CA Corporate Records	A
	Naito, Corp.	CA Corporate Records	D

1		Sea Mirror, Inc.	CA Corporate Records	C
2	President	Camel Coins, Inc.	CA, NV Corporate Records	B
3		Daikoku Marketing, Inc.	CA Corporate Records	H
4		Ebisu Marketing, Corp.	CA Corporate Records	F
5		Hotei Marketing, Inc.	CA Corporate Records	G
6		Kotobuki Marketing, Inc.	CA, NV Corporate Records	E
7		Lead Express, Inc.	CA, NV Corporate Records	A
8		Naito, Corp.	CA, NV Corporate Records	D
9		Sea Mirror, Inc.	CA, NV Corporate Records	C
10	Secretary	Camel Coins, Inc.	CA, NV Corporate Records	B
11		Ebisu Marketing, Corp.	CA Corporate Records	F
12		Lead Express, Inc.	NV Corporate Records	A
13		Sea Mirror, Inc.	NV Corporate Records	C
14	Chief Financial Officer	Camel Coins, Inc.	CA, NV Corporate Records	B
15		Ebisu Marketing, Corp.	CA Corporate Records	G
16	Treasurer	Camel Coins, Inc.	NV Corporate Records	B
17		Lead Express, Inc.	NV Corporate Records	A
18		Sea Mirror, Inc.	NV Corporate Records	C
19	Vice President	Ebisu Marketing, Corp.	CA Corporate Records	F
20		Sea Mirror, Inc.	CA Corporate Records	C
21	Authorized signatory	Camel Coins, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	WW, DDD, MMM
22		Daikoku Marketing, Inc.	Wells Fargo signature cards	EEE
23		Ebisu Marketing, Corp.	Open Bank, Wells Fargo, Bank of Hope signature cards	XX, FFF, GGG, MMM
24		Hotei Marketing, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	CCC, HHH, MMM
25		Kotobuki Marketing, Inc.	Open Bank, Wells Fargo signature cards	YY, III
26		Lead Express, Inc.	Open Bank, Wells Fargo signature cards	ZZ, JJJ
27		Naito, Corp.	Open Bank, Wells Fargo signature cards	AAA, KKK
28		Sea Mirror, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	BBB, HHH, MMM

## B. Keishi Ikeda

15. Keishi Ikeda is connected to each of the Corporate Defendants as either an owner, director, officer, or registered agent. Table 3 below summarizes the connections between Keishi Ikeda and the Corporate Defendants.

Table 3

Title	Company	Source Record	Att.
Owner	Kotobuki Marketing, Inc.	Kotobuki Marketing OB – 3791 Sig. Card	YY
Director	Kotobuki Marketing, Inc.	NV Corporate Records	E

1	Secretary	Camel Coins, Inc.	CA, NV Corporate Records	<b>B</b>
2		Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
3		Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
4		Kotobuki Marketing, Inc.	CA, NV Corporate Records	<b>E</b>
5		Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
6		Naito, Corp.	CA, NV Corporate Records	<b>D</b>
7		Sea Mirror, Inc.	CA, NV Corporate Records	<b>C</b>
8	Chief Financial Officer	Camel Coins, Inc.	CA Corporate Records	<b>B</b>
9		Daikoku Marketing, Inc.	CA Corporate Records	<b>H</b>
10		Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
11		Hotei Marketing, Inc.	CA Corporate Records	<b>G</b>
12		Kotobuki Marketing, Inc.	CA Corporate Records	<b>E</b>
13		Lead Express, Inc.	CA Corporate Records	<b>A</b>
14		Naito, Corp.	CA Corporate Records	<b>D</b>
15		Sea Mirror, Inc.	CA Corporate Records	<b>C</b>
16	Treasurer	Camel Coins, Inc.	NV Corporate Records	<b>B</b>
17		Kotobuki Marketing, Inc.	NV Corporate Records	<b>E</b>
18	Registered Agent	Lead Express, Inc.	CA, NV Corporate Records	<b>A</b>
19		Naito, Corp.	NV Corporate Records	<b>D</b>
20		Sea Mirror, Inc.	CA, NV Corporate Records	<b>C</b>
21		Ebisu Marketing, Corp.	CA Corporate Records	<b>F</b>
22		Camel Coins, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>WW, DDD, MMM</b>
23	Authorized Signatory	Daikoku Marketing, Inc.	Wells Fargo signature cards	<b>EEE</b>
24		Ebisu Marketing, Corp.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>XX, FFF, GGG, MMM</b>
25		Hotei Marketing, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>CCC, HHH, MMM</b>
26		Kotobuki Marketing, Inc.	Open Bank, Wells Fargo signature cards	<b>YY, III</b>
27		Lead Express, Inc.	Open Bank, Wells Fargo signature cards	<b>ZZ, JJJ</b>
28		Naito, Corp.	Open Bank, Wells Fargo signature cards	<b>AAA, KKK</b>
29		Sea Mirror, Inc.	Open Bank, Wells Fargo, Bank of Hope signature cards	<b>BBB, HHH, MMM</b>
30		La Posta Tribal Lending Enterprise	Cash Management Agreements	<b>II, JJ, KK</b>
31	Authorized user cash management services	La Posta Tribal Lending Enterprise	Company Agreements for Electronic Payments	<b>LL, MM, NN</b>
32	Authorized representative for electronic payments	La Posta Tribal Lending Enterprise	Company Agreements for Electronic Payments	<b>LL, MM, NN</b>

### III. CONSUMER COMPLAINTS

16. During the course of the investigation, the FTC obtained consumer complaints from two

sources: the Consumer Sentinel Network (“Sentinel”) and the Better Business Bureau

1 ("BBB"). Sentinel is a database of consumer complaints maintained and administered by the  
2 FTC. Access to complaints is reserved to law enforcement agencies who become a Sentinel  
3 member. Sentinel receives complaints from consumers who directly contact the FTC, as well  
4 as those shared by data contributors, including other law enforcement agencies and consumer  
5 protection organizations. Given the vast number of complaints from numerous sources,  
6 Sentinel complaints are purged from the database regularly every five years.  
7

8 17. During the course of the investigation, I searched the Sentinel database for complaints filed  
9 against Defendants. I found 972 consumer complaints submitted to Sentinel as of May 7,  
10 2020 regarding Defendants. Not all of these complaints include details about the subject  
11 transactions. Some only include consumer information, the type of product or service  
12 involved, and the subject business's information. Of the complaints that do include a  
13 substantive narrative though, the majority report the business practices set forth in the FTC's  
14 complaint. True and correct copies of the Sentinel complaints collected are available upon  
15 request.  
16

17 18. During the investigation, the FTC obtained, and I reviewed, records from the BBB serving  
18 the Pacific Southwest regarding Defendants. The BBB records include both consumer  
19 reviews and complaints. Whereas a BBB review is a comment of a consumer's experience  
20 with a business, a BBB complaint involves correspondence between the consumer, BBB, and  
21 subject business working to resolve a dispute that arose from a transaction. The BBB  
22 typically sends consumer complaints to Sentinel. I reviewed the complaints submitted by the  
23 BBB to determine whether the complaints we received from the BBB were duplicates of the  
24 complaints I downloaded through Sentinel. I determined that there are seventy-seven BBB  
25 complaints.  
26

complaints that were not included in the Sentinel complaints, bringing the total complaints concerning the Defendants to 1,049 from December 2011 to May 2020.

19. True and correct copies of the BBB records the FTC obtained are attached to my declaration as noted in Table 4 below.

**Table 4**

Trade Name	Attachment	BBB Record Type	Time Period	Record Count
Gentle Breeze	J	Complaints	Dec. 2011–Mar. 2020	165
		Reviews	June 2015–Mar. 2019	65
Green Stream Lending	K	Complaints	Feb. 2014–Mar. 2020	159
		Reviews	June 2014–Mar. 2019	46
Harvest Moon Financial	L	Complaints	June 2013–Mar. 2020	121
		Reviews	Apr. 2014–Apr. 2019	51

#### **IV. DEFENDANTS' WEBSITES**

20. Throughout the course of the investigation, I regularly visited the various websites related to the Defendants and this scheme. I periodically preserved each of these websites using one of three tools, or some combination of the three. One is HTTrack, a free Web crawler and offline browser utility that allows users to download a website from the Internet.<sup>3</sup> The second is the Snip & Sketch app, which allows a user to capture screenshots, available on Windows 10 devices. The third is Camtasia, a screen recording software available for purchase.<sup>4</sup>

21. The multiple true and correct copies of the web pages making up the Defendants' websites I captured throughout the investigation are preserved and available upon request. True and correct copies of the most recent versions of Defendants' websites are attached to this

<sup>3</sup> Users can download the HTTrack program at <https://www.httrack.com/>.

<sup>4</sup> More information on Camtasia is available at <https://www.techsmith.com/video-editor.html>.

1 declaration as set forth below. Captures of previous versions of the websites are available  
2 upon request.

- 3 a. gentlebreezeonline.com—**Attachment M**;  
4 b. greenstreamlending.com—**Attachment N**;  
5 c. harvestmoonloans.com—**Attachment O**;  
6 d. kotobukimarketing.com—**Attachment P**;  
7 e. naito-corp.com—**Attachment Q**;  
8 f. naitogroup.com—(redirects to naito-corp.com) **Attachment R**.

9  
10 22. Defendant's websites, harvestmoonloans.com, greenstreamlending.com, and  
11 gentlebreezeonline.com, contain redirect web addresses to lendredirect.com for the following  
12 navigation buttons: Login, Apply Now, and Contact Us. Defendant's website  
13 gentlebreezeonline.com also includes links to the same domain, lendredirect.com, for the My  
14 Account and View Privacy Policy buttons.

15  
16 23. During the course of the investigation, I visited the harvestmoonloans.com website and  
17 clicked on the "Apply Now" hyperlink. As mentioned, I was redirected to a landing page on  
18 lendredirect.com. The landing page consisted of an online payday loan application with  
19 many blank fields in which an applicant would enter information. The application page  
20 asked for such information as name, address, date of birth, Social Security number,  
21 employment information, financial information (including bank name, routing number, and  
22 account number). The webpage allows applicants to select the amount they want to borrow  
23 using a drop down box. I did not enter any information and proceed beyond the landing  
24 page. I recorded this visit using the Camtasia. A copy of the screen recording is available  
25 upon request.

24. During the investigation, I monitored another short-term loan website owned by the Tribal Defendant, jetcredit365.com. The multiple true and correct copies of this website that I captured throughout the investigation are preserved and available upon request. A true and correct copy of the most recent capture of this website is appended as **Attachment S**.

## V. DOMAIN NAME REGISTRATION RECORDS

25. During the investigation, the FTC issued a civil investigative demand to, and obtained records from, GoDaddy.com LLC, an Internet domain registrar and web hosting company. True and correct copies of the registration information provided by GoDadddy are attached hereto as follows:

- a. GoDaddy Shopper ID 29537467—**Attachment T**;
  - b. GoDaddy Shopper ID 41348753—**Attachment U**.

26. The payment information provided by GoDaddy for gentlebreezeonline.com, greenstreamlending.com, and harvestmoonloans.com shows Tumbleweed Software, Inc., doing business as Answers ETC.,<sup>5</sup> pays the invoices directed to the Tribal Defendant for these domain names.

27. After the FTC received the documents from GoDaddy, the domain name registration of camelcoins.com, gentlebreezeonline.com, harvestmoonloans.com, mygbo.com, naito-corp.com, naitogroup.com, and sea-mirror.com entered a brief expiration period.<sup>6</sup> However,

<sup>5</sup> Through research, I found that Tumbleweed Software, Inc. is a Texas corporation. Doing business as Answers, ETC., it provides, among other things, loan management software that allows customers to create different loan types (e.g., single pay, installment loan, etc.), underwrite loans, and process loan payments. Answers, ETC. is the domain name registrant organization of lendredirect.com, the redirect web address embedded in the Tribal Defendant's websites discussed above in Paragraph 22. More information regarding Tumbleweed Software is available on its website at <https://answersetc.com/>.

<sup>6</sup> Each of these three domain name registrations expired on November 29, 2019, and were updated a day later on November 30, 2019. They are now each set to expire on November 29, 2021.

1 the registration was immediately updated, DNS, or Domain Name System, service was not  
 2 interrupted, and the domains remained fully functional.<sup>7</sup>

## 3 VI. COMMERCIAL MAIL RECEIVING AGENCIES

4 28. Defendant's corporate filings include several variations of the following address: 2780 South  
 5 Jones Blvd, Suite 200, Las Vegas, NV 89146. Research revealed that address is occupied by  
 6 the business Forward Nevada, a commercial mail receiving agency ("CMRA"). The use of  
 7 CMRAs can be indicia of fraud, as such services can be used to hide an entity's actual  
 8 physical location.

9 29. During the investigation, I obtained PS Form 1583, Application for Delivery of Mail  
 10 Through Agent, from the United States Postal Inspection Service for the five following suites  
 11 at Forward Nevada: 3132, 3637, 3692, 3695, and 3827. True and correct copies of the PS  
 12 Form 1583s are appended as **Attachment V**. Table 5 below summarizes Defendants' use of  
 13 services provided by Forward Nevada.

14 15 **Table 5**

16 <b>Applicant</b>	17 <b>Address</b>	18 <b>Mail Recipient</b>	19 <b>Different Related Company Listed</b>
Takehisa Naito	2780 South Jones Blvd, Suite 200-3132, Las Vegas, NV 89146	Takehisa Naito	None
	2780 South Jones Blvd, Suite 200-3637, Las Vegas, NV 89146	Lead Express, Inc.	Naito, Corp.
	2780 South Jones Blvd, Suite 200-3692, Las Vegas, NV 89146	Sea Mirror, Inc.	None
	2780 South Jones Blvd, Suite 200-3695, Las Vegas, NV 89146	Camel Coins, Inc.	None
	2780 South Jones Blvd, Suite 200-3827, Las Vegas, NV 89146	Kotobuki Marketing, Inc.	None

25  
 26 <sup>7</sup> For more information regarding the expiration timeline of domains registered with GoDaddy, visit  
<https://www.godaddy.com/help/what-happens-when-my-domain-expires-609>.

1           **VII. SHARED ADDRESSES**

2           30. During the investigation, I identified a set of addresses, besides the address discussed above,  
 3           that Defendants have used. Table 6 below summarizes those shared addresses and associated  
 4           entities.

5           **Table 6**

<b>101 Convention Center Drive, Suite 500</b> <b>Las Vegas, NV 89109</b> <b>(Office building – current call center)</b>		
<b>Associated Entity</b>	<b>Source Record</b>	<b>Att.</b>
Camel Coins, Inc.	Camel Coins WF – 9898 Sig. Card	Att. III
Daikoku Marketing, Inc.	Daikoku Marketing WF – 6881 Sig. Card	Att. JJJ
Ebisu Marketing, Corp.	Ebisu Marketing WF – 6154 Sig. Card	Att. LLL
Hotei Marketing, Inc.	Hotei Marketing WF – 3413 Sig. Card	Att. MMM
Kotobuki Marketing, Inc.	Kotobuki Marketing WF – 9062 Sig. Card	Att. NNN
Lead Express, Inc.	Lead Express WF – 9880 Sig. Card	Att. OOO
Naito, Corp.	Naito Corp WF – 9539 Sig. Card	Att. PPP
Sea Mirror, Inc.	Sea Mirror WF – 8354 Sig. Card	Att. QQQ
<b>1930 Wilshire Boulevard, Suite 400</b> <b>Los Angeles, CA 90057</b> <b>(Commercial building – previous call center)</b>		
<b>Associated Entity</b>	<b>Source Record</b>	<b>Att.</b>
Camel Coins, Inc.	CA Statement of Information 2011	B
Daikoku Marketing, Inc.	CA Articles of Incorporation 2013 CA Statement of Information 2018, 2019	H
Ebisu Marketing, Corp.	CA Statement of Information 2011, 2012, 2018-2020	F
Hotei Marketing, Inc.	CA Articles of Incorporation 2013 CA Statement of Information 2018-2020	G
Lead Express, Inc.	CA Statement of Information 2014	A
Naito, Corp.	CA Statement of Information 2017, 2018 LA County Clerk Fictitious Business Name Statement 2011	D
<b>8 1/2 Crestwood Road</b> <b>Boulevard, CA 91905</b> <b>(Tribal land)</b>		
<b>Associated Entity</b>	<b>Source Record</b>	<b>Att.</b>
Gentle Breeze Online	Website	M
Green Stream Lending	Website	N
Harvest Moon Financial	Website	O

24           **VIII. LOAN APR CALCULATIONS**

25           31. During the course of the investigation, I calculated the annual percentage rate (“APR”) for  
 26           loans to certain consumers from Defendants based on those consumers’ loan amounts,

number of payments, and total of payments, and compared the resulting APRs to the  
 advertised terms on the Defendants' websites. To calculate accurate APRs on closed-end  
 loans under TILA, and its implementing Regulation Z, I used a computer program named  
 "APRWIN," which is produced and managed by the Office of the Comptroller of the  
 Currency (OCC), available for download at <https://www.occ.treas.gov/tools-forms/tools/compliance-bsa/aprwin-software.html>. OCC states the product, initially released  
 in May 2008, is "an efficient tool for verifying annual percentage rates." The tool is  
 commonly relied upon by government agencies to calculate APRs.

32. To calculate the APRs for each consumer's loan, I used the payment history records of  
 consumers Rebecca Brinks, Eboni Cohran, Rachel Hayes, Todd Jordan, Jennifer Kircher,  
 Shannon McCollum, Jeremy Neal, and Schana Taylor, which are attached to their respective  
 declarations and can be found at PX01 Att. D, PX06 Att. C, PX07 Att. A, PX08 Att. A, PX09  
 Att. A, PX11 Att. B, Aoun Att. A, Jenkins Att. D. Table 7 below compares the actual  
 number of payments each consumer made versus the number of payments advertised on  
 Defendants' websites.

**Table 7**

Consumer	Amount Borrowed	Advertised Number of Payments	Actual Number of Payments	Difference between Actual and Advertised Number of Payments
Brinks	\$100	1	3	2
Brinks	\$200	1	11	10
Brinks	\$100	1	7	6
Cohran	\$200	1	10	9
Cohran	\$100	1	4	3
Hayes	\$250	1	12	11
Jordan	\$150	1	10	9
Jordan	\$100	1	7	6
Kircher	\$200	1	6	5
McCollum	\$150	1	11	10
Neal	\$200	1	4	3
Taylor	\$200	1	20	19
Taylor	\$150	1	17	16

1           33. My review of Defendants' websites shows that they advertise loans with two different fee  
 2           options: \$30 per \$100 borrowed and \$45 per \$100 borrowed. Tables 8 and 9 below compare  
 3           the actual total of payments taken by Defendants to repay each consumer's loan versus the  
 4           total of payments to repay those loans as advertised on Defendants' websites. Table 8 shows  
 5           the comparisons for the \$30 per \$100 borrowed option, and Table 9 shows the comparisons  
 6           for the \$45 per \$100 borrowed option.

7           **Table 8**

<b>Consumer</b>	<b>Amount Borrowed</b>	<b>Advertised Total of Payments**</b>	<b>Actual Total of Payments</b>	<b>Difference between Actual and Advertised Total of Payments</b>
Brinks	\$100	\$131.38	\$238.15	\$106.77
Brinks	\$200	\$262.76	\$1,022.93	\$760.17
Brinks	\$100	\$131.38	\$304.19	\$172.81
Eboni	\$200	\$262.76	\$926.61	\$663.85
Eboni	\$100	\$131.38	\$185.02	\$53.64
Hayes	\$250	\$328.45*	\$1,391.64	\$1,063.19
Jordan	\$150	\$197.07*	\$697.04	\$500.33
Jordan	\$100	\$131.38	\$324.92	\$193.54
Kircher	\$200	\$262.76	\$557.15	\$294.39
McCollum	\$150	\$197.07*	\$765.27	\$568.20
Neal	\$200	\$262.76	\$369.66	\$106.90
Taylor	\$200	\$262.76	\$1,854.41	\$1,591.65
Taylor	\$150	\$197.07*	\$1,183.13	\$986.06

17           \*Includes advertised fees and interest.

18           \*\*Advertisements in increments of \$100. Advertised total of payments based on extrapolation.

**Table 9**

<b>Consumer</b>	<b>Amount Borrowed</b>	<b>Advertised Total of Payments**</b>	<b>Actual Total of Payments</b>	<b>Difference between Actual and Advertised Total of Payments</b>
Brinks	\$100	\$146.38	\$238.15	\$91.77
Brinks	\$200	\$292.76	\$1,022.93	\$730.17
Brinks	\$100	\$146.38	\$304.19	\$157.81
Eboni	\$200	\$292.76	\$926.61	\$633.85
Eboni	\$100	\$146.38	\$185.02	\$38.64
Hayes	\$250	\$365.95*	\$1,391.64	\$1,025.69
Jordan	\$150	\$219.57*	\$697.04	\$477.47
Jordan	\$100	\$146.38	\$324.92	\$178.54
Kircher	\$200	\$292.76	\$557.15	\$264.39
McCollum	\$150	\$219.57*	\$765.27	\$545.70
Neal	\$200	\$292.76	\$369.66	\$76.90
Taylor	\$200	\$292.76	\$1,854.41	\$1,561.65
Taylor	\$150	\$219.57*	\$1,183.13	\$963.56

---

1 \*Includes advertised fees and interest.  
 2 \*\*Advertisements in increments of \$100. Advertised total of payments based on extrapolation.

3 34. Tables 10 and 11 below compare the actual APR based on the number and total of payment  
 4 taken by Defendants to repay each consumer's loan versus the APR advertised on  
 5 Defendants' websites. Table 11 shows the comparisons for the \$30 per \$100 borrowed  
 6 option, and Table 12 shows the comparisons for the \$45 per \$100 borrowed option.

7 **Table 10**

<b>Consumer</b>	<b>Amount Borrowed</b>	<b>Advertised APR</b>	<b>Actual APR</b>	<b>Difference between Actual and Advertised APR</b>
Brinks	\$100	818.1214%	2055.7129%	1237.5915%
Brinks	\$200	818.1214%	1096.9984%	278.8770%
Brinks	\$100	818.1214%	1036.1393%	218.0179%
Eboni	\$200	818.1214%	1172.7409%	354.6195%
Eboni	\$100	818.1214%	781.3257%	(36.7957%)
Hayes	\$250	818.1214%	1193.7173%	375.5959%
Jordan	\$150	818.1214%	1077.6106%	259.4892%
Jordan	\$100	818.1214%	1207.4692%	389.5706%
Kircher	\$200	818.1214%	977.8515%	159.7301%
McCollum	\$150	818.1214%	1186.5952%	368.4738%
Neal	\$200	818.1214%	1083.2202%	265.0988%
Taylor	\$200	818.1214%	1371.1660%	553.0446%
Taylor	\$150	818.1214%	1134.8775%	316.7561%

16 **Table 11**

<b>Consumer</b>	<b>Amount Borrowed</b>	<b>Advertised APR</b>	<b>Actual APR</b>	<b>Difference between Actual and Advertised APR</b>
Brinks	\$100	1209.1929%	2055.7129%	846.52%
Brinks	\$200	1209.1929%	1096.9984%	(112.1945%)
Brinks	\$100	1209.1929%	1036.1393%	(173.0536%)
Eboni	\$200	1209.1929%	1172.7409%	(36.452%)
Eboni	\$100	1209.1929%	781.3257%	(427.8672%)
Hayes	\$250	1209.1929%	1193.7173%	(15.4756%)
Jordan	\$150	1209.1929%	1077.6106%	(131.5823%)
Jordan	\$100	1209.1929%	1207.4692%	(1.7237%)
Kircher	\$200	1209.1929%	977.8515%	(231.3414%)
McCollum	\$150	1209.1929%	1186.5952%	(22.5977%)
Neal	\$200	1209.1929%	1083.2202%	(125.9727%)
Taylor	\$200	1209.1929%	1371.1660%	161.9731%
Taylor	\$150	1209.1929%	1134.8775%	(74.3154%)

1       35. I also calculated the APR based on the terms contained in the TILA disclosures in three  
 2       examples of Defendants' loan agreements and determined that Defendants calculated the  
 3       APR incorrectly in all three. The TILA disclosure in the loan agreement provided by  
 4       Defendants to consumer Rachel Hayes (attached as PX20 Att. C) states an amount financed  
 5       of \$250, number of payments of 1, finance charge of \$116.19, total of payments of \$366.19,  
 6       and APR of 1130.92%. Using the APRWIN software, the APR for those repayment terms is  
 7       actually 1211.6957%. The TILA disclosure in the loan agreement provided by Defendants to  
 8       consumer Milaya Paggett (attached as PX20 Att. A) states an amount financed of \$500,  
 9       number of payments of 1, finance charge of \$233.88, total of payments of \$733.88, and APR  
 10      of 1130.92%. Using the APRWIN software, the APR for those repayment terms is actually  
 11      1219.5171%. The TILA disclosure in another loan agreement provided by Defendants to  
 12      consumer Milaya Paggett (attached as PX20 Att. B) states an amount financed of \$100,  
 13      number of payments of 1, finance charge of \$46.28, total of payments of \$146.28, and APR  
 14      of 1299.408%. Using the APRWIN software, the APR for those repayment terms is actually  
 15      1206.5857%.

## 18       **IX. BANK RECORDS**

19       36. Pursuant to civil investigative demands issued to financial institutions and through other  
 20      means, the FTC obtained records and data concerning Defendants' business accounts and  
 21      limited information pertaining to individual accounts. Based upon my review of these  
 22      records, I observed that during this scheme, the Defendants primarily operated through the  
 23      United States commercial banking system. However, Corporate and Individual Defendants  
 24      transacted with Japanese banks, as well. As discussed in more detail below, my review  
 25      showed that the consumer-facing front to Defendants' payday operation are the Tribal

1 Defendant's websites, and consumers' loan repayments are funneled through merchant  
 2 processing accounts and settlement accounts in the Tribal Defendant's name before going to  
 3 the Corporate and Individual Defendants' bank accounts. Because the FTC obtained a  
 4 voluminous amount of records, I do not include each document, such as monthly statements,  
 5 wire transfers, deposit items, and the like. Instead, I append as attachments true and correct  
 6 copies of particular records the FTC obtained below, and I summarize the others. True and  
 7 correct copies of the complete bank records are available upon request.  
 8

#### 9      A. Third-Party Service Providers

10     37. During the investigation, the FTC issued civil investigative demands to, and obtained  
 11 documents from, PeopleFirst Bank ("PFB"), CNB Bank & Trust, N.A. ("CNB Bank"), and  
 12 North American Banking Company ("NABC"). Through third-party service providers, the  
 13 Tribal Defendant used these banks to fund loans to the Tribal Defendant's borrowers and  
 14 withdraw payments from borrowers' bank accounts via automated clearinghouse ("ACH")  
 15 credits and debits as well as to receive and return payments associated with imaged cash  
 16 letters (which are electronic files containing batches of remotely created checks). Based  
 17 upon my review of the obtained documents, I identified four third-party service provider  
 18 arrangements involving seven depository institutions. Table 12 below summarizes these  
 19 findings.

21      **Table 12**

<b>Third-Party Service Providers</b>	<b>Time Period</b>	<b>Depository Institutions</b>
Merchant Payment Solutions, LLC	June 2019–present	PeopleFirst Bank
Flex Payment Solutions, LLC	Nov. 2017–present	CNB Bank & Trust, N.A.
USIO, Inc. f/k/a Payment Data Systems, Inc.	Sept. 2017–Aug. 2019	North American Banking Company
	May 2017–Sept. 2017	Metropolitan Commercial Bank
	Aug. 2016–May 2017	Generations Federal Credit Union
Viking Client Services, LLC	July 2015–June 2018	North American Banking Company

26      **1. Merchant Payment Solutions, LLC**

38. On June 13, 2019, the Tribal Defendant entered into three-year Merchant Services Agreements (“MSAs”) with Merchant Payment Solutions, LLC to process ACH transactions and credit, debit, and prepaid cards. True and correct copies of these MSAs are appended as **Attachments W, X and Y.**

39. On June 24, 2019, the Tribal Defendant opened six settlement accounts at PeopleFirst Bank to receive the consumer payments processed by Merchant Payment Solutions. Table 13 below provides more specifics about each account.

**Table 13**

<b>Settlement Purpose</b>	<b>Settlement Account</b>
ACH Credits	Gentle Breeze PFB – 5760
	Green Stream Lending PFB – 5728
	Harvest Moon Financial PFB – 5784
ACH Debits	Gentle Breeze PFB – 5752
	Green Stream Lending PFB – 5736
	Harvest Moon Financial PFB – 5776

40. The opening documents and account agreements for the Tribal Defendant's settlement accounts at PeopleFirst Bank list the Tribal Defendant's purpose as an installment lender. True and correct copies of these account opening documents are appended as **Attachments Z, AA, BB, CC, DD, EE, FF, GG, and HH.**

41. On June 26, 2019, the Tribal Defendant entered into cash management services agreements with PeopleFirst Bank, who sublicenses from Fiserv, that permit users authorized by the Tribal Defendant to, among other things, transfer funds, via computer, through ACH transactions. The Tribal Defendant authorized Keishi Ikeda as a user of these cash management services. A true and correct copy of these Cash Management Agreements are appended as **Attachments II, JJ, and KK.**

42. On June 27, 2019, the Tribal Defendant executed Company Agreements for Electronic Payments (“Electronic Payments’ Agreement”) with PeopleFirst Bank to initiate ACH credits

1 and debits for the purpose of “funding loans and processing loan payments.” The Tribal  
2 Defendant listed Keishi Ikeda as an authorized representative to initiate and instruct  
3 PeopleFirst Bank to submit ACH credits and debits as well as handle ACH credit return  
4 requests from consumers’ banks. Further, on August 13, 2019, the Tribal Defendant  
5 completed a Third-Party Service Provider Agreement acknowledging that Merchant Payment  
6 Solutions will initiate ACH credits and debits to PeopleFirst Bank on behalf of the Tribal  
7 Defendant. True and correct copies of these Electronic Payments’ Agreement and Third-  
8 Party Service Provider Agreement are appended as **Attachments LL, MM, and NN.**

9  
10 43. On March 19, 2020, I spoke with an employee of PeopleFirst Bank. The employee told me  
11 that PeopleFirst Bank had recently requested documents from the Tribal Defendant that they  
12 would not provide. The employee did not go into the specifics just that, as a result,  
13 PeopleFirst Bank decided to close all Tribal Defendant accounts earlier in March 2020.  
14 Because of anticipated payment obligations, however, only one Tribal Defendant account  
15 had actually been closed when we spoke. The Tribal Defendant instructed PeopleFirst Bank  
16 to wire the balance in the closed account to The First National Bank of Albany.  
17

18       **2. Flex Payment Solutions, LLC**

19 44. On October 28, 2016, Flex Payment Solutions and CNB Bank entered into an Alliance  
20 Agreement. The Agreement states Flex Payment Solutions, on behalf of its clients, and CNB  
21 Bank would enter into one or more agreements that allowed Flex Payment Solutions’ clients  
22 to perform ACH credits and debits, submit remotely created checks, and handle returns  
23 associated with those submitted remotely created checks through CNB Bank.  
24

25 45. On October 26, 2017, Flex Payment Solutions faxed CNB Bank a referral packet containing  
26 background information about the Tribal Defendant to open a merchant account. The packet

1 included, among other things, the Tribal Defendant's financial reports for 2015, 2016, and  
 2 2017, as well as a portion of the Tribal Defendant's Consumer Loan Agreement that has the  
 3 following refinance policy language built-in: "Unless otherwise notified, your account will  
 4 be debited the minimum amount due to refinance this loan for another term."

5 46. On November 1, 2017, Flex Payment Solutions opened a merchant account, on behalf of the  
 6 Tribal Defendant, with CNB Bank, Gentle Breeze CNB – 4144. True and correct copies of  
 7 the Alliance Agreement, referral packet, and account opening documents are appended as  
 8 **Attachment OO.**

9 47. On March 20, 2020, I spoke with an employee of CNB Bank. This employee told me that  
 10 the bank received an email on March 16, 2020 from Flex Payment Solutions, on behalf of the  
 11 Tribal Defendant. The email instructed CNB Bank to begin, effective immediately,  
 12 transferring consumer funds collected through remotely created checks to three settlement  
 13 accounts with The First National Bank of Albany, Gentle Breeze FNBA – 3507, Green  
 14 Stream Lending FNBA – 3751, and Harvest Moon Financial FNBA – 3629.  
 15

16       **3. Viking Client Services, LLC**

17 48. On November 25, 2019, I received an email from an employee of North American Banking  
 18 Company. In an attachment to the email, the employee explained that the Tribal Defendant  
 19 has six settlement accounts at the bank to receive payments processed by Viking Client  
 20 Services, LLC, also doing business as Viking Billing Service. A true and correct copy of the  
 21 email attachment is appended as **Attachment PP.**  
 22

23 49. On July 8, 2015, Viking Billing Service opened six settlement accounts, on behalf of the  
 24 Tribal Defendant, with North American Banking Company. Table 14 below provides more  
 25 specifics about each account.  
 26

**Table 14**

<b>Settlement Purpose</b>	<b>Settlement Account</b>
ACH Credits	Gentle Breeze NABC – 6427
	Green Stream Lending NABC – 6468
	Harvest Moon Financial NABC – 6443
ACH Debits	Gentle Breeze NABC – 6435
	Green Stream Lending NABC – 6476
	Harvest Moon Financial NABC – 6450

50. A true and correct copy of the account opening documents at North American Banking  
Company are appended as **Attachments QQ, RR, SS, TT, UU, and VV.**

4. **USIO, Inc. f/k/a Payment Data Systems, Inc.**

51. The November 25, 2019 email from North American Banking Company discussed above  
also stated that in September 2017, the Tribal Defendant began using Payment Data Systems,  
who was a processing client of North American Banking Company, to process ACH credits  
and debits related to consumer loans until August 2019.

52. During my analysis of the Tribal Defendant's checking accounts at First Dakota National  
Bank, Gentle Breeze FDNB – 9322, Green Stream Lending FDNB – 8212, and Harvest  
Moon Financial FDNB – 9232, I observed ACH transactions from Metropolitan Commercial  
Bank and Generations Federal Credit Union processed by Payment Data Systems.

19           **B. Business Checking Accounts**

20           **1. Corporate Defendants**

21       53. During the investigation, the FTC issued civil investigative demands to, and obtained  
22       documents from, Open Bank, Wells Fargo Bank, and Bank of Hope at which the Corporate  
23       Defendants maintain bank accounts. The FTC obtained records and data concerning the  
24       Corporate Defendant's business checking accounts, which allows them to perform day-to-  
25       day banking tasks, such as accepting deposits, making payments, transferring funds,  
26       withdrawing cash and the like. During this scheme, the Corporate Defendants have opened

numerous checking accounts at different banks. My review of the bank records shows that individual Defendants, Takehisa Naito and Keishi Ikeda have been authorized signers on these accounts. I summarize the Corporate Defendants' business checking accounts uncovered during the investigation in Table 15 below.

**Table 15**

Financial Institution	Account Name	Last 4 Digits	Time Period	Opening Document(s)
Open Bank	Camel Coins, Inc.	0482	May 2013–present	Att. WW
	Ebisu Marketing, Corp.	0466	May 2013–present	Att. XX
	Kotobuki Marketing, Inc.	3791	Feb. 2017–present	Att. YY
	Lead Express, Inc.	0474	May 2013–present	Att. ZZ
	Naito, Corp.	0458	May 2013–present	Att. AAA
	Sea Mirror, Inc.	0557	June 2013–present	Att. BBB
	Hotei Marketing, Inc.	0490	May 2013–July 2017	Att. CCC
Well Fargo Bank, N.A.	Camel Coins, Inc.	9898	Nov. 2012–present	Att. DDD
	Daikoku Marketing, Inc.	6881	May 2013–present	Att. EEE
	Ebisu Marketing, Inc.	3462	Apr. 2013–present	Att. FFF
		6154	Apr. 2014–present	Att. GGG
	Hotei Marketing, Inc.	3413	Apr. 2013–present	Att. HHH
	Kotobuki Marketing, Inc.	9062	Jan. 2015–present	Att. III
	Lead Express, Inc.	9880	Nov. 2012–present	Att. JJJ
	Naito, Corp.	9539	Dec. 2012–present	Att. KKK
	Sea Mirror, Inc.	8354	Mar. 2013–present	Att. LLL
Bank of Hope (f/k/a BBCN Bank)	Camel Coins, Inc.	5753	June 2012–Jan. 2013	Att. MMM
	Ebisu Marketing, Corp.	3333	Apr. 2010–June 2013	
		4224	Nov. 2010–June 2013	
	Lead Express, Inc.	4550	May 2011–Apr. 2013	
	Hotei Marketing, Inc.	7316	Mar. 2013–Apr. 2013	
	Sea Mirror, Inc.	7324	Mar. 2013–Apr. 2013	
JPMorgan Chase Bank, N.A.	Naito, Corp.	3244	Nov. 2010–Apr. 2013	*
	Lead Express, Inc.	8031	~2012	**

\* Bank of Hope did not provide a signature card or other opening documents for this account, Naito, Corp BOH – 3244, only statements, deposits, cancelled checks, and wire transfers.

\*\* Wire transfer records associated with Harvest Moon Financial CVB – 6746 denote the existence of this account. The FTC did not obtain any bank records from JPMorgan Chase Bank, pursuant to our issued CID. Likely because the applicable time period, August 1, 2016 to present, started after the account was closed.

## 2. Tribal Defendant

54. During the investigation, the FTC issued civil investigative demands to, and obtained documents from, First Dakota National Bank and Chippewa Valley Bank at which (along with the settlement accounts described above) the Tribal Defendant maintains bank accounts.

I summarize the Tribal Defendant's business checking accounts uncovered during the investigation in Table 16 below.

**Table 16**

Financial Institution	Account Name	Last 4 Digits	Time Period	Opening Documents
PeopleFirst Bank	Gentle Breeze	5744	June 2019–present	Att. NNN
	Green Stream Lending	5720	June 2019–present	Att. OOO
	Harvest Moon Financial	5768	June 2019–present	Att. PPP
First Dakota National Bank	La Posta Tribal Lending Enterprise	9782	Feb. 2017–present	Att. QQQ
	Gentle Breeze	9322	May 2013–present	Att. RRR
	Green Stream Lending	8212	May 2013–present	Att. SSS
	Harvest Moon Financial	9232	June 2013–present	Att. TTT
North American Banking Company	Gentle Breeze	6708	Aug. 2015–June 2018	Att. UUU
	Green Stream Lending	6690	Aug. 2015–June 2018	Att. VVV
	Harvest Moon Financial	6682	Aug. 2015–June 2018	Att. WWW
Chippewa Valley Bank	Gentle Breeze	6720	Aug. 2012–Apr. 2014	Att. XXX
	Gentle Breeze	6738	Aug. 2012–Apr. 2014	Att. YYY
	Harvest Moon Financial	6746	Aug. 2012–Apr. 2014	Att. ZZZ
	Harvest Moon Financial	6753	Aug. 2012–Apr. 2014	Att. AAAA

## X. FLOW OF MONEY

55. Based on my analysis of the account records that the FTC obtained, pursuant to CIDs, from the Defendants' banks and other records, as appended below, I describe and create tables to summarize the Defendants' movement of funds in this scheme. Unless otherwise noted, the applicable time period for my analysis set forth below covers Defendants' bank transactions from August 1, 2016 to February 28, 2020.

### A. Corporate Defendants Buy Consumer Traffic for Tribal Defendant's Websites

56. To drive traffic to the Tribal Defendant's consumer loan websites, the Corporate Defendants paid online advertisers, marketers, and lead sellers. In all, the Corporate Defendants paid more than \$3.5 million to these type of vendors.

57. During the investigation, the FTC became aware of documents produced in separate non-public investigations that related to Defendants. Some documents concern advertising the Tribal Defendant's consumer loan websites and others are about purchasing short-term loan leads. I describe each of these documents in turn below.

1       58. On or about July 16, 2014, Camel Coin, Lead Express, and Sea Mirror each entered into  
 2           separate agreements, executed by Takehisa Naito, with an agency to place one or more  
 3           advertisements (ad banners, hyperlinks, text content, buttons, newsletters, email, etc.) on the  
 4           Internet to drive traffic to the Tribal Defendant's consumer loan websites. In addition, credit  
 5           applications submitted to the advertising agency by Camel Coin, Lead Express, and Sea  
 6           Mirror claimed their company web addresses were harvestmoonloans.com,

7           gentlebreezeonline.com, and greenstreamlending.com, respectively.

8       59. On or about October 20, 2014, La Posta Tribal Lending Enterprise, doing business as Gentle  
 9           Breeze, appointed Lead Express the authority to manage all lead purchase campaigns with a  
 10          lead seller. Moreover, La Posta and Lead Express executed an agreement with this lead  
 11          seller to purchase consumer leads.

12       60. In or around December 2014, Sea Mirror entered into an agreement to purchase consumer  
 13          leads for payday loans. A true and correct copy of this agreement is attached hereto as  
 14           **Attachment BBBB.**

#### 17       **B. Corporate Defendants Make Loans to Tribal Defendant to Lend to Consumers**

18       61. On March 28, 2011, the La Posta Tribal Lending Enterprise and Naito, Corp. executed a  
 19          Promissory Note with a principal loan balance up to \$5,000,000. The principal balance  
 20          outstanding was to be increased by advances to the Tribal Defendant and decreased by their  
 21          remittances. The Promissory Note states the due date of any outstanding portion of the loan  
 22          would be due on March 27, 2012 unless extended by the parties. The Tribal Defendant was  
 23          required to make monthly interest payments. The customer accounts receivables contained  
 24          in the ledger associated with this line of credit partly secured this loan. Takehisa Naito

1 signed this note as Chief Executive Officer (“CEO”) of Naito, Corp. A true and correct copy  
2 of this note is appended as **Attachment CCCC.**

3 62. On March 18, 2012, Green Stream Lending and Naito, Corp. executed a Promissory Note  
4 with a principal loan balance up to \$20,000,000. The principal balance outstanding was to be  
5 increased by advances to the Tribal Defendant and decreased by their remittances. The  
6 Promissory Note states the due date of any outstanding portion of the loan would be due on  
7 March 17, 2018 unless extended by the parties. The Tribal Defendant was required to make  
8 monthly interest payments. The customer accounts receivables contained in the ledger  
9 associated with this line of credit partly secured this loan. Takehisa Naito signed this note as  
10 CEO of Naito, Corp. A true and correct copy of this note is appended as **Attachment**  
11 **DDDD.**

12 63. On September 14, 2012, Harvest Moon Financial and Naito, Corp. executed a Promissory  
13 Note with a principal loan balance up to \$20,000,000. The principal balance outstanding was  
14 to be increased by advances to the Tribal Defendant and decreased by their remittances. The  
15 Promissory Note states the due date of any outstanding portion of the loan would be due on  
16 September 13, 2017 unless extended by the parties. The Tribal Defendant was required to  
17 make monthly interest payments. The customer accounts receivables contained in the ledger  
18 associated with this line of credit partly secured this loan. Takehisa Naito signed this note as  
19 CEO of Naito, Corp. A true and correct copy of this note is appended as **Attachment**  
20 **EEEE.**

21 64. Documents obtained pursuant to civil investigative demand from CNB Bank included  
22 balance sheets prepared as of December 31, 2015 and 2016 for the Tribal Defendant  
23 (Attachment OO). The 2015 balance sheet reflects notes payables to Naito, Corp. for  
24

1 \$5,227,973.20 and interest payable of \$26,632.66. The 2016 balance sheet reflects notes  
 2 payables to Naito, Corp. for \$3,315,662.41 and interest payable of \$8,464.49.

3 **C. Corporate Defendants Pay Costs of Tribal Defendant's Websites' Telephones**

4 65. In or around September 2015, the Defendants used Naito, Corp. to establish a  
 5 telecommunications account with Convergence Communications, Inc. ("Convergence  
 6 Communications").<sup>8</sup> The FTC obtained, pursuant to a civil investigative demand, documents  
 7 and data associated with that account. A copy of all Convergence Communications records  
 8 are available upon request. A true and correct copy of the relevant Convergence  
 9 Communications records are appended as **Attachment FFFF**.

10 66. These records show that, among other things, the following telephone numbers have been  
 11 assigned to the Naito, Corp. account: (888) 797-6064, (877) 218-7437, (888) 296-7226, (888)  
 12 645-4171, and (855) 228-7344—all numbers that the Tribal Defendants list in their consumer  
 13 loan websites, correspondence with consumers, and loan agreements. The phone numbers  
 14 (888) 797-6064 and (877) 218-7437 are regularly and consistently associated with Harvest  
 15 Moon Financial; (888) 296-7226 are regularly and consistently associated with Green Stream  
 16 Lending; and (888) 645-4171 are regularly and consistently associated with Gentle Breeze  
 17 Online.

18 67. The phone number (855) 228-7344 has been connected to Harvest Moon Financial and Green  
 19 Stream Lending. As discussed above, I reviewed archived versions of the Defendants'  
 20  
 21  
 22  
 23

---

24 <sup>8</sup> On or about March 11, 2020, in response to a request for further information pursuant to the issued CID, I received  
 25 an email from an employee at Convergence Communications who reported that the company had filed for  
 26 bankruptcy recently. On or about March 3, 2020, CS Communications was listed as the debtor in a petition filed for  
 Chapter 7 in the United States Bankruptcy Court, Southern District of California. All documents filed in this case,  
 number 20-01237-MM7, may be inspected through PACER (Public Access to Court Electronic Records at  
[www.pacer.gov](http://www.pacer.gov)).

1 consumer loan websites. Archived versions of the websites for Harvest Moon Financial and  
 2 Green Stream Lending include the phone number (855) 228-7344 in their Privacy web pages.

3 68. These records show that since June 2016 almost \$800,000 has been invoiced to this account.  
 4 Naito, Corp. and Kotobuki Marketing have paid \$181,266 for the phone service provided by  
 5 Convergence Communications.

6

7 **D. Corporate Defendants Pay Tribal Defendant's Service Providers**

8 69. To carry out this scheme, the Corporate Defendants engage service providers who play a  
 9 critical role in the Tribal Defendant's ability to underwrite, manage, and service loans issued  
 10 to consumers. Table 17 summarizes these expenses paid by the Corporate Defendants.

12 **Table 17**

<b>Service Description</b>	<b>Corporate Account</b>	<b>Amount Paid</b>
Identity and Account Verification	Camel Coins WFB – 9898	\$125,000
	Lead Express WFB – 9880	\$112,500
	Sea Mirror WFB - 8354	\$100,000
Loan Management	Camel Coins WFB – 9898	\$217,957
	Lead Express WFB – 9880	\$195,827
	Sea Mirror WFB - 8354	\$152,650

17 **E. Tribal Defendant Takes Consumer Loan Payments**

18 70. Based on my analysis of the account records produced by financial institutions from August  
 19 1, 2016 to February 28, 2020 and financial statements covering 2015 and 2016, consumer  
 20 payments, less returns, have totaled more than \$93 million.

21 71. The Tribal Defendant took consumer funds via ACH debits, negotiable instruments, such as  
 22 personal checks and U.S. postal money orders, and RCCs. Through Gentle Breeze CNB –  
 23 4144, the Tribal Defendant withdrew more than \$2.4 million from consumers' accounts using  
 24 remotely created checks. True and correct copies of a small selection of remotely created  
 25 checks deposited into Gentle Breeze CNB – 4144 are appended as **Attachment GGGG**.

72. I summarize the records showing total consumer payments in Table 18 below.

Table 18

Account Short Name	Consumer Payments Returned	Consumer Payments Received	Net Consumer Payments Received
2015 Balance Sheet	\$0.00	\$27,501,516.84	\$27,501,516.84
2016 Balance Sheet	\$0.00	\$11,141,486.66	\$11,141,486.66
LPTLE CNB - 7141	\$2,059,866.07	\$4,500,746.95	\$2,440,880.88
LPTLE CNB - 7141	\$625,621.47	\$1,321,146.42	\$695,524.95
Harvest Moon NABC - 6682	\$668.21	\$2,311,712.12	\$2,311,043.91
Green Stream NABC - 6690	\$373.21	\$1,679,650.86	\$1,679,277.65
Gentle Breeze NABC - 6708	\$629.94	\$2,159,627.85	\$2,158,997.91
Harvest Moon FDNB - 9232	\$5,374.58	\$14,955,299.06	\$14,949,924.48
Gentle Breeze FDNB - 9322	\$3,136.93	\$13,545,653.88	\$13,542,516.95
Green Stream FDNB - 8212	\$1,683.97	\$10,594,087.25	\$10,592,403.28
Gentle Breeze PFB - 5752	\$348,984.73	\$2,489,868.68	\$2,140,883.95
Green Stream PFB - 5736	\$289,030.15	\$2,036,389.07	\$1,747,358.92
Harvest Moon PFB - 5776	\$342,880.64	\$2,585,107.90	\$2,242,227.26
Gentle Breeze PFB - 5744	\$835.82	\$658.71	(\$177.11)
Green Stream PFB - 5720	\$1,469.80	\$0.00	(\$1,469.80)
Harvest Moon PFB - 5768	\$160.00	\$0.00	(\$160.00)
<b>Total</b>	<b>\$3,680,715.52</b>	<b>\$96,822,952.25</b>	<b>\$93,142,236.73</b>

#### **F. Defendants Receive Debt Collection Remittances**

73. Both the Corporate and the Tribal Defendants have received consumer funds from debt collections, settlements, or garnishments. These funds are usually in the form of checks deposited along with other negotiable instruments used for consumer payments. By in large, the deposited amounts were from collection activity though, not regular consumer payments. Because of the time constraint of removing each individual consumer payment item, I provide the total deposited amount. The Corporate Defendants received less than \$1,000, while the Tribal Defendants received over \$700,000 through debt collections, settlements, or garnishments.

## **G. Defendants Commingle Funds**

74. The Defendants frequently transferred money among their accounts. Rounded to the nearest dollar, the Corporate Defendants transferred \$15,728,430 to the Individual Defendants; the Individual Defendants transferred \$15,914,189 to the Corporate Defendants; the Corporate

1 Defendants transferred \$12,035,227 to the Tribal Defendant; and the Tribal Defendants  
2 transferred \$32,800,648 to the Corporate Defendants. There is no apparent business reason  
3 for the transfers between the Corporate Defendants and the Individual Defendants; nor the  
4 transfers from the Corporate Defendants, other than Naito, Corp. (these were likely related to  
5 the Notes), to the Tribal Defendant. In numerous instances, the transfers from the Tribal  
6 Defendants to the Corporate Defendants included a description that the transaction was  
7 related to an expense, such as “leads commission,” “call center,” “interest,” or “principal  
8 payment.” I summarized the transfers from Corporate Defendants to Individual Defendants,  
9 Individual Defendants to Corporate Defendants, Corporate Defendants to Tribal Defendants,  
10 and Tribal Defendants to Corporate Defendants. My summary charts of these transfers are  
11 appended as **Attachment HHHH**.

13 **H. Asset Dissipation**

14 75. My review of documents obtained from Bank of Hope, Open Bank, and Wells Fargo Bank  
15 show numerous wire transfers from corporate accounts to accounts owned or controlled by  
16 Takehisa Naito in Japan. Between May 2012 and April 2013, Lead Express BOH – 4550  
17 wired at least \$600,000 to Lead Kikaku, a business where Takehisa Naito is a president. A  
18 true and correct copy of wire reports for Lead Express BOH – 4550 is appended as  
19

20 **Attachment III.**

21 76. The Federal Reserve Bank of New York maintains Fedwire, a funds transfer system that is a  
22 service of the Federal Reserve Banks. I reviewed documents obtained by the FTC from  
23 Fedwire and observed that on March 21, 2017, Naito, Corp. OB – 0458 wired \$40,000 to  
24 Takehisa Naito, and another \$20,000 to a Haekyoung Naito, who I suspect is related to  
25 Takehisa Naito.

1       77. There has been regular disbursements from corporate accounts for seemingly personal  
2                  expenses, such as automobile expenses, credit cards, meals, and lodging. However, the FTC  
3                  did not obtain records from American Express. Therefore, it is possible the purchases made  
4                  using American Express were business related. Nevertheless, I include these expenses here  
5                  because the FTC did obtain monthly statements concerning the Corporate Defendants' credit  
6                  cards issued through Wells Fargo Bank, N.A., and the majority of purchases were personal in  
7                  nature. Based on my analysis, the Corporate Defendants spent at least \$1.9 million of  
8                  corporate funds for personal expenses.

10       78. The largest portion of personal expenditures is credit cards. The Corporate Defendants paid  
11           American Express and Wells Fargo Bank, N.A. about \$1,774,312. The Corporate Defendants  
12           spent another \$129,348 on automobile expenses. These were primarily a monthly payment  
13           to Mercedes Benz Financial Services. There were monthly country club dues, too, totaling  
14           \$23,997. The Corporate Defendant also appears to have paid the U.S. Internal Revenue  
15           Service over \$10,000 on behalf of Keishi Ikeda. Lodging, meals, and travel, which included  
16           overseas trips, topped \$7,000. Lastly, the Corporate Defendant directly covered more than  
17           \$1,500 in medical bills. Copies of these checks are attached as **Attachment JJJJ**.

19 79. The Corporate Defendants' bank records show that funds were disbursed from the corporate  
20 accounts in the form of cash withdrawals, checks made payable to "cash," wires to  
21 individuals, and checks made out to the Individual Defendants. In the table below, Table 19,  
22 I describe gross funds paid to Takehisa Naito and Keishi Ikeda.

Table 19

<b>Defendant</b>	<b>ADP Gross Salary (See Table 20)</b>	<b>Withdrawals</b>	<b>Checks Written to Cash</b>	<b>Checks/Wires</b>	<b>Total Funds Paid</b>
Takehisa Naito	\$227,000	\$0	\$52,600	\$360,000	\$639,600
Keishi Ikeda	\$898,320	\$49,157	\$34,856	\$105,420	\$1,087,753

1           **XI. ADP PAYROLL RECORDS**

2       80. Pursuant to a CID, the FTC obtained documents from ADP TotalSource, Inc.  
 3           ("TotalSource"), a professional employer organization, including copies of Client Services  
 4           Agreements, ACH/Preauthorized Payments/Direct Debit of Fess/Credits and Additional  
 5           Processing Terms, Verification of Employment records including payroll and tax  
 6           information, and general account information for five accounts the Corporate Defendants  
 7           maintain with TotalSource. True and correct copies of the ACH authorization agreements,  
 8           verifications of employment, and related account records are appended as **Attachment**  
 9           **KKKK.**

10      81. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for  
 11           Daikoku Marketing by signing a CSA and an Authorization Agreement as chief financial  
 12           officer ("CFO"). The Authorization Agreement grants TotalSource authorization to initiate  
 13           ACH transactions to Daikoku Marketing WFB – 6881 for funds owed to TotalSource. The  
 14           account demographics information for this account includes the web address  
 15           www.ebisumarketing.com. The verification of employment records show Keishi Ikeda on  
 16           the payroll since at least 2017.9

17      82. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Ebisu  
 18           Marketing by signing a CSA and an Authorization Agreement as CFO. The Authorization  
 19           Agreement grants TotalSource authorization to initiate ACH transactions to Ebisu Marketing  
 20           WFB – 6154 for funds owed to TotalSource. The account demographics information for this  
 21           account includes the web address www.ebisumarketing.com.

---

22  
 23  
 24  
 25  
 26       <sup>9</sup> Pursuant to the CID issued to TotalSource, the applicable time period for responsive documents was limited to  
           three years.

83. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Naito Corp. by signing a CSA and an Authorization Agreement as CFO. The Authorization Agreement grants TotalSource authorization to initiate ACH transactions to Naito Corp WFB – 9539 for funds owed to TotalSource. The account demographics information for this account includes the web address [www.ebisumarketing.com](http://www.ebisumarketing.com). The verification of employment records show Keishi Ikeda on the payroll since at least 2017.

84. On or about December 1, 2014, Keishi Ikeda created an account with TotalSource for Hotei Marketing by signing a CSA and an Authorization Agreement as CFO. The Authorization Agreement grants TotalSource authorization to initiate ACH transactions to Hotei Marketing WFB – 3413 for funds owed to TotalSource. The account demographics information for this account includes the web address [www.ebisumarketing.com](http://www.ebisumarketing.com). The verification of employment records show Keishi Ikeda on the payroll since at least September 2017.

85. On or about January 12, 2017, Keishi Ikeda created an account with TotalSource for Kotobuki Marketing by signing a CSA and an Authorization Agreement as CFO. The Authorization Agreement grants TotalSource authorization to initiate ACH transactions to Kotobuki Marketing WFB – 9062 for funds owed to TotalSource. The account demographics information for this account includes the address 101 Convention Center Drive, Suite 500, Las Vegas, NV 89109. The verification of employment records show Takehisa Naito on the payroll beginning in 2019.

86. I reviewed the earnings portion of the verifications of employment included in the TotalSource CID response. From January 6, 2017 to February 14, 2020, employees of the Corporate Defendants earned \$1,551,339. Table 20 below summarizes the total gross earnings by year of the Individual Defendants.

**Table 20**

<b>Individual Defendant</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>Total</b>
Takehisa Naito	\$0	\$0	\$227,000	Not provided	\$227,000
Keishi Ikeda	\$322,957	\$279,315	\$243,973	\$52,075	\$898,320

**XII. OTHER LAWSUITS**

87. During the course of the investigation, the FTC identified private actions involving, and  
against, the Defendants. Table 21 below lists these known actions.

**Table 21**

<b>Case Name</b>	<b>Case No.</b>	<b>Court</b>	<b>Relevant Party</b>	<b>Date Filed</b>	<b>Status</b>
Barrios v. Chex Systems, Inc. et al	8:20cv432	M.D. Fla.	Lead Express, Inc. Takehisa Naito	Feb. 25, 2020	Open
Gillison, et al v. Lead Express, Inc. et al	3:16cv41	E.D. Va.	Lead Express, Inc. Takehisa Naito	Jan. 19, 2016	Closed (Dec. 12, 2018)
Turnage, et al v. Clarity Services, LLC	3:14-cv-760	E.D. Va.	Lead Express, Inc. Takehisa Naito La Posta Tribal Lending Enterprise	Nov. 6, 2014	Closed (Sept. 3, 2015)
Christopher Stone v. Ebisu Marketing, Corp. et al	BC655331	CA Superior – Los Angeles	Ebisu Marketing, Corp. Takehisa Naito	Mar. 24, 2017	Closed (May 25, 2017)
Mark Hackett v. Hotei Marketing, Inc. et al	BC639589	CA Superior – Los Angeles	Ebisu Marketing Hotei Marketing, Inc. Harvest Moon Loans	Dec. 19, 2016	Open
Maria Alexandria Valencia v. Ebisu Marketing, Corp.	BC498677	CA Superior – Los Angeles	Ebisu Marketing, Corp.	Jan. 8, 2013	Open
Giovanna Peoples v. Ebisu Marketing, Corp. et al	BC660197	CA Superior – Los Angeles	Ebisu Marketing, Corp. Gentle Breeze Online La Posta Tribal Lending Enterprise	May 5, 2017	Closed (Dec. 6, 2017)
Short v. American Web Loan	2:16cv11304	E.D. Mich.	Lead Express (Terminated)	Apr. 8, 2016	Closed (Nov. 1, 2016)

1			Takehisa Naito (Terminated)		
2			Gentle Breeze (Terminated)		

3  
4 88. The FTC reviewed the different filings of the cases above. In *Gillison*, an employee of Lead  
5 Express and Takehisa Naito filed declarations concerning, among other things, their roles  
6 with the company and the services it provides to La Posta Tribal Lending Enterprise. In  
7 *Stone*, the plaintiff alleged that Ebisu Marketing hiring managers explained to him and other  
8 job candidates that Ebisu Marketing “provided so-called payday loans to the public.” In  
9 *Valencia*, Ebisu Marketing submitted, as an exhibit, an employment agreement between the  
10 company and Ms. Valencia, dated April 6, 2011. True and correct copies of these filings are  
11 appended as **Attachments LLLL, MMMM, NNNN, and OOOO.**  
12

13 89. During the investigation, the FTC identified that on March 16, 2011, the State of California,  
14 Business, Transportation and Housing Agency, Department of Corporations entered a Desist  
15 and Refrain Order against Takehisa Naito and another company for which he was president.  
16 The Desist and Refrain Order alleged that Takehisa Naito engaged in the business of finance  
17 lending and taking deferred deposit transactions with a license. A true and correct copy of  
18 the Desist and Refrain Order downloaded from the Department of Corporations website is  
19 attached as **Attachment PPPP.**  
20

21  
22 Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true  
23 and correct.  
24

25 Executed in Washington, D.C. on May 7, 2020.  
26

/s/ Rufus L. M. Jenkins  
Rufus L. M. Jenkins, MBA, CPA, CFE

**PX19 – DECLARATION OF RUFUS JENKINS  
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# **ATTACHMENT A**



**ROSS MILLER**  
Secretary of State  
204 North Carson Street, Suite 4  
Carson City, Nevada 89701-4520  
(775) 684 5708  
Website: www.nvsos.gov

Filed in the office of

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Entity Number  
**E0043102011-0**

## Articles of Incorporation (PURSUANT TO NRS CHAPTER 78)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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1. Name of Corporation:	Lead Express, Inc.		
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated <small>Name</small> <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below)		
	<small>Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity</small> <small>Street Address      City      Nevada      Zip Code</small> <small>Mailing Address (if different from street address)      City      Nevada      Zip Code</small>		
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with per value: 2000	Par value per share: \$ 0.01	Number of shares without per value:
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito <small>Name</small> <small>550 N Figueroa St., #4077</small> <small>Street Address</small> <small>Los Angeles</small> <small>CA</small> <small>90012</small> 2) <small>Name</small> <small>,</small> <small>Street Address</small> <small>City</small> <small>State</small> <small>Zip Code</small>		
5. Purpose: (optional; see instructions)	<i>The purpose of the corporation shall be:</i> <small>To engage in any lawful act or activity for which a corporation may be organized under Chapter 78 of NRS.</small>		
6. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	Business Filings Incorporated <small>Name</small> 8040 Excelsior Dr. Ste 200 <small>Address</small> <b>Mark Williams, AVP</b> <small>Incorporator Signature</small> Madison <small>WI</small> <small>53717</small> <small>City</small> <small>State</small> <small>Zip Code</small>		
7. Certificate of Acceptance of Appointment of Registered Agent:	<i>I hereby accept appointment as Registered Agent for the above named Entity.</i> <b>Mark Williams, AVP,</b> <b>Business Filings Incorporated</b> <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small> <b>January 25, 2011</b> <small>Date</small>		

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 4-10-09

## (PROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF 1/2011 TO 1/2012

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

**BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703 USA**



\*100101\*

Filed in the office of

  
 Ross Miller  
 Secretary of State  
 State of Nevada

Document Number

**20110148760-60**

Filing Date and Time

**02/28/2011 11:08 AM**

Entity Number

**E0043102011-0**A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

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- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form **FORM WILL BE RETURNED IF UNSIGNED**.
2. If there are additional officers, attach a list of them to this form.
3. Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing.

INITIAL LIST FILING FEE \$125.00

LATE PENALTY \$75.00

BUSINESS LICENSE FEE \$200.00

LATE PENALTY \$100.00

**CHECK ONLY IF APPLICABLE**

- Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- Month and year your State Business License expires: 20\_\_\_\_\_
- This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
 002 - 501(c) Nonprofit Entity  
 003 - Home-based Business  
 004 - Natural Person with 4 or less rental dwelling units  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co.

NAME  
TAKEHISA NAITO

TITLE(S)

**PRESIDENT (OR EQUIVALENT OF)**

CITY

LOS ANGELES

STATE

CA

ZIP CODE

90012

ADDRESS  
550 N FIGUEROA ST. #4077NAME  
TAKEHISA NAITO

TITLE(S)

**SECRETARY (OR EQUIVALENT OF)**

CITY

LOS ANGELES

STATE

CA

ZIP CODE

90012

ADDRESS  
550 N FIGUEROA ST. #4077NAME  
TAKEHISA NAITO

TITLE(S)

**TREASURER (OR EQUIVALENT OF)**

CITY

LOS ANGELES

STATE

CA

ZIP CODE

90012

ADDRESS  
550 N FIGUEROA ST. #4077NAME  
TAKEHISA NAITO

TITLE(S)

**DIRECTOR**

CITY

LOS ANGELES

STATE

CA

ZIP CODE

90012

ADDRESS  
550 N FIGUEROA ST. #4077

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

Title

PRESIDENT

Date

2/28/2011 11:06:13 AM

**Signature of Officer**Nevada Secretary of State Initial List Profit  
Revised 8-5-09

PX19 - 41

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF 1/2012 TO 1/2013

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\*

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703 USA**

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE**

- Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- Month and year your State Business License expires: 20\_\_\_\_\_
- This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity
- 002 - 501(c) Nonprofit Entity
- 003 - Home-based Business
- 004 - Natural Person with 4 or less rental dwelling units
- 005 - Motion Picture Company
- 006 - NRS 680B.020 Insurance Co.

NAME  
TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS  
6260 W. 3RD ST. #407

CITY

LOS ANGELES

STATE

CA 90036 ZIP CODE

NAME  
TAKEHISA NAITO

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS  
6260 W. 3RD ST. #407

CITY

LOS ANGELES

STATE

CA 90036 ZIP CODE

NAME  
TAKEHISA NAITO

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS  
6260 W. 3RD ST. #407

CITY

LOS ANGELES

STATE

CA 90036 ZIP CODE

NAME  
TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS  
6260 W. 3RD ST. #407

CITY

LOS ANGELES

STATE

CA 90036 ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

X

Title

C.E.O.

Date

1/30/2012 3:28:42 PM

Nevada Secretary of State Annual List Profit  
Revised 6-5-09

Signature of Officer

PX19 - 42

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.  
NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN, 2013 TO JAN, 2014

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED  
311 S DIVISION ST  
CARSON CITY, NV 89703**

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

This corporation is a publicly traded corporation. The Central Index Key number is:

This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE., #614 , USA				
NAME TAKEHISA NAITO	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE , #614 , USA				
NAME TAKEHISA NAITO	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE , #614 , USA				
NAME TAKEHISA NAITO	TITLE(S) <b>DIRECTOR</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE , #614 , USA				

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

X

**Signature of Officer**

Title <b>PRESIDENT</b>	Date 12/7/2012 2:12:57 PM
Novada Secretary of State Annual List Profit Revised 3-9-12	

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2013

TO

JAN, 2014

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\*

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703**

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
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5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
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## CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

 Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

 This corporation is a publicly traded corporation. The Central Index Key number is:  This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

STATE

ZIP CODE

CA 90028

NAME

TAKEHISA NAITO

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

STATE

ZIP CODE

CA 90028

NAME

KEISHI IKEDA

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS

136 S. BROADWAY , USA

CITY

STATE

ZIP CODE

CA 90277

NAME

TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

STATE

ZIP CODE

CA 90028

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X****Signature of Officer**

Title

PRESIDENT

Date

5/21/2013 12:25:31 PM

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN, 2014 TO JAN, 2015



ENTITY NUMBER

E0043102011-0

USE BLACK INK ONLY - DO NOT HIGHLIGHT

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\*

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2 If there are additional officers, attach a list of them to this form

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the office of 	Document Number <b>20130754238-25</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>11/18/2013 5:18 PM</b>
Entity Number <b>E0043102011-0</b>	

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:
- NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.
- This corporation is a publicly traded corporation. The Central Index Key number is:
- This publicly traded corporation is not required to have a Central Index Key number.

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)	CITY HOLLYWOOD	STATE CA	ZIP CODE 90038
ADDRESS 1619 N. LA BREA AVE., #614 , USA				
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
ADDRESS 136 S. BROADWAY , USA				
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
ADDRESS 136 S. BROADWAY , USA				
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE., #614 , USA				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

KEISHI IKEDA

**Signature of Officer or  
Other Authorized Signature**

Title  
**SECRETARY**

Date  
**11/18/2013 5:18:46 PM**

Nevada Secretary of State List Profit  
Revised 7-31-13

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2015

TO

JAN, 2016

ENTITY NUMBER

E0043102011-0



\*100101\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\*

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2 If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$200.00 Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the office of

  
 Ross Miller  
 Secretary of State  
 State of Nevada

Document Number

20140786365-52

Filing Date and Time

12/01/2014 12:51 PM

Entity Number

E0043102011-0

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

1619 N. LA BREA AVE., #614 , USA

CITY

HOLLYWOOD

STATE

CA 90028 ZIP CODE

NAME

KEISHI IKEDA

ADDRESS

136 S. BROADWAY , USA

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

CITY

REDONDO BEACH

STATE

CA 90277 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

1619 N. LA BREA AVE., #614 , USA

TITLE(S)

TREASURER (OR EQUIVALENT OF)

CITY

REDONDO BEACH

STATE

CA 90028 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

1619 N. LA BREA AVE., #614 , USA

TITLE(S)

DIRECTOR

CITY

HOLLYWOOD

STATE

CA 90028 ZIP CODE

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

JAWED SABEH

Title

GENERAL MANAGER

Date

12/1/2014 12:50:56 PM

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised 7-31-13

PX19 - 46

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2016

TO

JAN, 2017

ENTITY NUMBER

E0043102011-0



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\*

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the office of <i>Barbara K. Cegavske</i>	Document Number <b>20150522028-17</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>11/30/2015 2:13 PM</b>
	Entity Number <b>E0043102011-0</b>

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

CITY

HOLLYWOOD

STATE

CA 90028 ZIP CODE

ADDRESS

1619 N. LA BREA AVE., #614 , USA

NAME

KEISHI IKEDA

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

CITY

REDONDO BEACH

STATE

CA 90277 ZIP CODE

ADDRESS

136 S. BROADWAY , USA

NAME

TAKEHISA NAITO

TITLE(S)

TREASURER (OR EQUIVALENT OF)

CITY

REDONDO BEACH

STATE

CA 90028 ZIP CODE

ADDRESS

1619 N. LA BREA AVE., #614 , USA

NAME

TAKEHISA NAITO

TITLE(S)

DIRECTOR

CITY

HOLLYWOOD

STATE

CA 90028 ZIP CODE

ADDRESS

1619 N. LA BREA AVE., #614 , USA

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Title

PRESIDENT

Date

11/30/2015 2:13:15 PM

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised 7-1-15

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2017

TO

JAN, 2018

ENTITY NUMBER

E0043102011-0



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\*

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2 If there are additional officers, attach a list of them to this form.

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4 State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5 Make your check payable to the Secretary of State.

6 **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7 Return the completed form to Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

This corporation is a publicly traded corporation. The Central Index Key number is:

This publicly traded corporation is not required to have a Central Index Key number.

NAME

TAKEHISA NAITO

ADDRESS

1930 WILSHIRE BLVD, SUITE 400 , USA

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

CITY

LOS ANGELES

STATE

CA 90057 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

1930 WILSHIRE BLVD, SUITE 400 , USA

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

CITY

LOS ANGELES

STATE

CA 90057 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

1930 WILSHIRE BLVD, SUITE 400 , USA

TITLE(S)

TREASURER (OR EQUIVALENT OF)

CITY

LOS ANGELES

STATE

CA 90057 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

1930 WILSHIRE BLVD, SUITE 400 , USA

TITLE(S)

DIRECTOR

CITY

LOS ANGELES

STATE

CA 90057 ZIP CODE

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title

PRESIDENT

Date

11/23/2016 8:20:16 AM

Nevada Secretary of State List Profit  
Revised 7-1-15

PX19 - 48

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2017

TO

JAN, 2018

ENTITY NUMBER

E0043102011-0



\*100103\*

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- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

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1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

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006 - NRS 680B.020 Insurance Co.

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- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE, #614				
NAME KEISHI IKEDA	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
ADDRESS 8760 W. PATRICK LANE, UNIT 2016				
NAME KEISHI IKEDA	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
ADDRESS 8760 W. PATRICK LANE, UNIT 2016				
NAME TAKEHISA NAITO	TITLE(S) <b>DIRECTOR</b>	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
ADDRESS 1619 N. LA BREA AVE, #614				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Signature of Officer or  
Other Authorized Signature

Title  
**PRESIDENT**

Date  
6/9/2017 8:07:24 AM

Nevada Secretary of State List Profit  
Revised: 7-1-15

PX19 - 49

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN. 2018

TO

JAN. 2019

ENTITY NUMBER

E0043102011-0



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

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- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89117
ADDRESS 7430 YONIE CT				
NAME KEISHI IKEDA	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
ADDRESS 8760 W. PATRICK LANE, UNIT 2016				
NAME KEISHI IKEDA	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
ADDRESS 8760 W. PATRICK LANE, UNIT 2016				
NAME TAKEHISA NAITO	TITLE(S) <b>DIRECTOR</b>	CITY LAS VEGAS	STATE NV	ZIP CODE 89117
ADDRESS 7430 YONIE CT				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title <b>DIRECTOR</b>	Date 12/5/2017 3:07:07 PM
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Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

PX19 - 50

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

LEAD EXPRESS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

JAN, 2019

TO

JAN, 2020

ENTITY NUMBER

E0043102011-0



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

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- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** **TAKEHISA NAITO**

**Signature of Officer or  
Other Authorized Signature**

Title  
**PRESIDENT** Date  
**11/14/2018 3:10:40 PM**

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

PX19 - 51

3606656

S&DC-S/N	<b>Statement and Designation by Foreign Corporation</b>
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To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:

- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and
- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. Note: If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

SA  
FILED  
Secretary of State  
State of California

1PC SEP 24 2013

This Space For Office Use Only

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm).

**Corporate Name** (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]. For general corporate name requirements and restrictions in California, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).)

① Lead Express, Inc.

#### Corporate History

② State or foreign country where this corporation was formed: Nevada

**Service of Process** (List a California resident or an active 1505 corporation in California that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may not list your own corporation as the agent. Do not list an address if the agent is a 1505 corporation.)

③ a. Business Filings Incorporated

Agent's Name

b.

Agent's Street Address (if agent is not a corporation)

City (no abbreviations)

CA

State Zip

The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.

#### Corporate Addresses

④ a. 2780 S. Jones Blvd Ste. 3637, Las Vegas, Nevada 89146

Street Address of Principal Executive Office

City (no abbreviations)

State Zip

b.

Street Address of Principal Office in California, if any

City (no abbreviations)

CA

State Zip

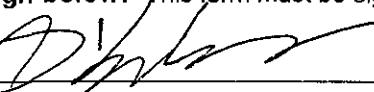
c.

Mailing Address of Principal Executive Office, if different from 4a or 4b

City (no abbreviations)

State Zip

**Read and sign below:** This form must be signed by an officer of the foreign corporation.

►   
Sign here

Takehisa Naito

President

Print your name here

Your business title

Make check/money order payable to: **Secretary of State**

**By Mail**

**Drop-Off**

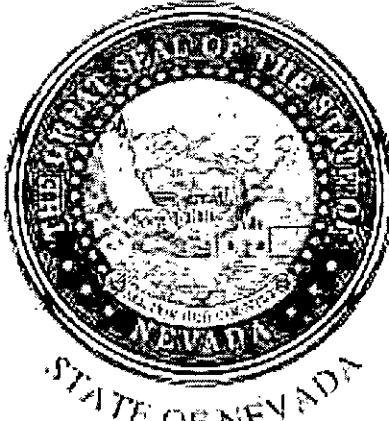
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

Secretary of State  
Business Entities, P.O. Box 944260  
Sacramento, CA 94244-2600

Secretary of State  
1500 11th Street, 3rd Floor  
Sacramento, CA 95814  
**PX19-52**

3606656

SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

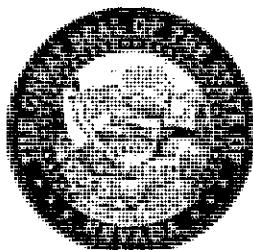
I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LEAD EXPRESS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 25, 2011, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 12, 2013.

A handwritten signature of Ross Miller.

ROSS MILLER  
Secretary of State



Electronic Certificate  
Certificate Number: C20130912-2277  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>



**State of California  
Secretary of State**

F

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**Statement of Information**

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**1. CORPORATE NAME**

LEAD EXPRESS, INC.  
2780 S JONES BLVD STE 3637  
LAS VEGAS, NV 89146

**2. CALIFORNIA CORPORATE NUMBER**

C3606656

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.
- If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
2780 S JONES BLVD STE 3637	LAS VEGAS	NV	89146
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1930 WILSHIRE BLVD STE 400	LOS ANGELES	CA	90057

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4

CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 1619 N LA BREA AVE #614	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
8. SECRETARY KEISHI IKEDA	ADDRESS 136 S BROADWAY	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 136 S BROADWAY	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

C 2113485

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY  
BUSINESS FILINGS INCORPORATED

STATE ZIP CODE

CA

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

9/3/2014

KEISHI IKEDA

C.F.O.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

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**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

D1418632



**Secretary of State  
Certificate of Surrender  
(Foreign Qualified Corporation ONLY)**

SURC

**IMPORTANT — Read Instructions before completing this form.**There is **No Fee** for filing a Certificate of Surrender

**Copy Fees** – First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

Note: For information about Franchise Tax Board final tax return requirements,  
go to <https://www.ftb.ca.gov>.

FILED ✓

**Secretary of State  
State of California**

**OCT 04 2017**

VPL This Space For Office Use Only *test*

**1. Corporate Name** (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

Lead Express, Inc.

**2. 7-Digit Secretary of State File Number**

**3. Jurisdiction** (State, foreign country or place where this corporation is formed.)

C3606656	Nevada
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**4. Mailing Address to mail copies of Legal Service** (Enter the complete mailing address where the California Secretary of State may forward copies of any legal documents against the corporation that are served on the Secretary of State intended for the corporation.)

Mailing Address of Corporation	City (no abbreviations)	State	Zip Code
101 Convention Center Dr Suite 500	Las Vegas	NV	89109

**5. Required Statements** (Do not alter the Required Statements – ALL must be true to file this Certificate of Surrender.)

Statements 5(a) – 5(d) are true:

- a) The corporation hereby surrenders its rights and authority to transact intrastate business in the State of California.
- b) The corporation hereby revokes its designation of agent for service of process in California.
- c) The corporation consents to process against it in any action upon any liability or obligation incurred within the State of California prior to the filing of this Certificate of Surrender may be served upon the California Secretary of State.
- d) All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.

**6. Read and Sign Below** (See Instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Keishi Ikeda, Secretary

Type or Print Name

2017 California Secretary of State  
[www.sos.ca.gov/business/be](http://www.sos.ca.gov/business/be)

SURC (REV 01/2017)

Clear Form

Print Form

4258156



**Secretary of State  
Statement and Designation by  
Foreign Corporation**

**S&DC-S/N****IMPORTANT — Read Instructions before completing this form.**

Must be submitted with a current Certificate of Good Standing issued by the government agency where the corporation was formed. See Instructions.

**Filing Fee** — \$100.00 (for a foreign stock corporation) or  
\$30.00 (for a foreign nonprofit corporation)

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov>.

**FILED**

Secretary of State  
State of California

MAR 22 2019

IP<sup>c</sup>

This Space For Office Use Only

- 1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

- 2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Lead Express, Inc.	Nevada
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**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box 2780 South Jones Blvd Suite 200-3637	City (no abbreviations) Las Vegas	State NV	Zip Code 89146
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION — Complete item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 4a or 4b

Business Filings Incorporated

**5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Takehisa Naito, President

Type or Print Name

4258198

## SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LEAD EXPRESS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 25, 2011, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0435



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****G588176****FILED**In the office of the Secretary of State  
of the State of California**APR-19 2019****1. CORPORATE NAME**

LEAD EXPRESS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258198

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
2780 SOUTH JONES BLVD SUITE 200-3637, LAS VEGAS, NV 89146			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
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6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
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**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146				

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146				

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146				

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 59



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****GC31537****FILED**In the office of the Secretary of State  
of the State of California**JAN-17 2020****1. CORPORATE NAME**

LEAD EXPRESS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258198

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS,, NV 89146	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

## 10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 60

# **ATTACHMENT B**



**ROSS MILLER**  
**Secretary of State**  
**204 North Carson Street, Suite 4**  
**Carson City, Nevada 89701-4520**  
**(775) 684 5708**  
**Website: www.nvsos.gov**

Filed in the office of

Ross Miller  
Secretary of State  
State of Nevada

Document Number  
**20120190407-96**

Filing Date and Time  
**03/19/2012 1:10 PM**  
Entity Number  
**E0157522012-8**

## Articles of Incorporation (PURSUANT TO NRS CHAPTER 78)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<p><b>1. Name of Corporation:</b></p> <p>Camel Coins, Inc.</p>			
<p><b>2. Registered Agent for Service of Process:</b> (check only one box)</p> <p><input checked="" type="checkbox"/> Commercial Registered Agent <b>Business Filings Incorporated</b>  Name _____</p> <p><input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below)</p> <p>Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity _____</p> <p>Street Address _____ City _____ Nevada _____ Zip Code _____</p> <p>Mailing Address (if different from street address) _____ City _____ Nevada _____ Zip Code _____</p>			
	<p><b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)</p> <p>Number of shares with par value: <b>2000</b> Par value per share: \$ <b>0.01</b> Number of shares without par value: _____</p>		
	<p><b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)</p> <p>1) Takehisa Naito  Name _____  550 N Figueroa St, #4077 City _____ Los Angeles _____ CA _____ 90012 _____  Street Address _____ State _____ Zip Code _____</p> <p>2) _____  Name _____  Street Address _____ City _____ State _____ Zip Code _____</p>		
<p><b>5. Purpose:</b> (optional; see Instructions)</p> <p><i>The purpose of the corporation shall be:</i>  To engage in any lawful act or activity for which a corporation may be organized under Chapter 78 of NRS.</p>			
<p><b>6. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)</p> <p>Business Filings Incorporated  Name _____   8040 Excelsior Dr., Ste 200 City _____ Madison _____ WI _____ 53717 _____  Address _____ State _____ Zip Code _____</p>			
<p><b>7. Certificate of Acceptance of Appointment of Registered Agent:</b></p> <p>I hereby accept appointment as Registered Agent for the above named Entity.    Mark Williams, AVP,  Business Filings Incorporated  Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity _____</p>			
			<b>March 19, 2012</b>
			Date

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 4-10-09

## (PROFIT) INITIAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF 3/2012 TO 3/2013**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703 USA**



\*100101\*

Filed in the office of 	Document Number <b>20120776365-09</b>
Ross Miller	Filing Date and Time <b>11/16/2012 10:44 AM</b>
Secretary of State	Entity Number
State of Nevada	<b>E0157522012-8</b>

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

(This document was filed electronically)  
ABOVE SPACE IS FOR OFFICE USE ONLY Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT: Read instructions before completing and returning this form**

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED**
- If there are additional officers, attach a list of them to this form
- Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office
- State business license fee is \$200.00 Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline
- Make your check payable to the Secretary of State
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
- Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing

INITIAL LIST FILING FEE \$125.00

LATE PENALTY \$75.00

BUSINESS LICENSE FEE \$200.00

LATE PENALTY \$100.00

**CHECK ONLY IF APPLICABLE**

- Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code: \_\_\_\_\_
- Month and year your State Business License expires: 11/11/20
- This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_
- This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
 002 - 501(c) Nonprofit Entity  
 003 - Home-based Business  
 004 - Natural Person with 4 or less rental dwelling units  
 005 - Motion Picture Company  
 006 - NRS 680B.020 Insurance Co.

NAME  
TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS  
1619 N LA BREA AVE #614 , USA

CITY

STATE

ZIP CODE  
CA 90028NAME  
TAKEHISA NAITO

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS  
1619 N LA BREA AVE #614 , USA

CITY

STATE

ZIP CODE  
CA 90028NAME  
TAKEHISA NAITO

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS  
1619 N LA BREA AVE #614

CITY

STATE

ZIP CODE  
CA 90028NAME  
TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS  
1619 N LA BREA AVE #614 , USA

CITY

STATE

ZIP CODE  
CA 90028

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X TAKEHISA NAITO

Title

PRESIDENT

Date

11/16/2012 10:37:54 AM

Signature of Officer

Nevada Secretary of State Initial List Profit  
Revised 8-5-09

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF :

MAR, 2013

TO

MAR, 2014

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\*

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

**BUSINESS FILINGS INCORPORATED**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703**

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT. Read instructions before completing and returning this form**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW** Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 580B.020 Insurance Co

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

 This corporation is a publicly traded corporation. The Central Index Key number is:  This publicly traded corporation is not required to have a Central Index Key number. 

NAME

TAKEHISA NAITO

TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

ADDRESS

550 N FIGUEROA ST, #4077 , USA

CITY

STATE

ZIP CODE

CA 90012

NAME

TAKEHISA NAITO

TITLE(S)

SECRETARY (OR EQUIVALENT OF)

ADDRESS

550 N FIGUEROA ST, #4077 , USA

CITY

STATE

ZIP CODE

CA 90012

NAME

TAKEHISA NAITO

TITLE(S)

TREASURER (OR EQUIVALENT OF)

ADDRESS

550 N FIGUEROA ST, #4077 , USA

CITY

STATE

ZIP CODE

CA 90012

NAME

TAKEHISA NAITO

TITLE(S)

DIRECTOR

ADDRESS

550 N FIGUEROA ST, #4077 , USA

CITY

STATE

ZIP CODE

CA 90012

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

X

Signature of Officer

Title

PRESIDENT

Date

4/12/2013 4:08 52 PM

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

\*110105\*

Document Number

20130246132-84

Filing Date and Time

04/12/2013 4:09 PM

Entity Number

E0157522012-8

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

MAR, 2013

TO

MAR, 2014

\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\*

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is

**BUSINESS FILINGS INCORPORATED**  
**311 S DIVISION ST**  
**CARSON CITY, NV 89703**

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT [www.nvsos.gov](http://www.nvsos.gov)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

## CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

 Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: **NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

 This corporation is a publicly traded corporation. The Central Index Key number is:  This publicly traded corporation is not required to have a Central Index Key number. 

NAME

TAKEHISA NAITO

ADDRESS

550 N FIGUEROA ST, #4077 , USA

TITLE(S)

**PRESIDENT (OR EQUIVALENT OF)**

CITY

LOS ANGELES

STATE

CA 90012 ZIP CODE

NAME

KEISHI IKEDA

ADDRESS

136 S. BROADWAY , USA

TITLE(S)

**SECRETARY (OR EQUIVALENT OF)**

CITY

REDONDO BEACH

STATE

CA 90277 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

550 N FIGUEROA ST, #4077 , USA

TITLE(S)

**TREASURER (OR EQUIVALENT OF)**

CITY

LOS ANGELES

STATE

CA 90012 ZIP CODE

NAME

TAKEHISA NAITO

ADDRESS

550 N FIGUEROA ST, #4077 , USA

TITLE(S)

**DIRECTOR**

CITY

LOS ANGELES

STATE

CA 90012 ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**X****Signature of Officer**

Title

PRESIDENT

Date

5/15/2013 10:22:35 AM

Nevada Secretary of State Annual List Profit  
Revised 3-9-12

#110105\*

Document Number

20130323290-35

Filing Date and Time

05/15/2013 10:22 AM

Entity Number

E0157522012-8

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.  
NAME OF CORPORATION

FOR THE FILING PERIOD OF **2014** TO **2015**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT.** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.



Filed in the office of 	Document Number <b>20140058415-30</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>01/27/2014 5:54 AM</b>
Entity Number <b>E0157522012-8</b>	

ABOVE SPACE IS FOR OFFICE USE ONLY

4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline

5. Make your check payable to the Secretary of State

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B 020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

This corporation is a publicly traded corporation. The Central Index Key number is:

This publicly traded corporation is not required to have a Central Index Key number.

## NAME

TAKEHISA NAITO

## TITLE(S)

PRESIDENT (OR EQUIVALENT OF)

## CITY

HOLLYWOOD

## STATE

CA 90028

## ADDRESS

1619 N. LA BREA AVE., #614

## NAME

KEISHI IKEDA

## TITLE(S)

SECRETARY (OR EQUIVALENT OF)

## CITY

REDONDO BEACH

## STATE

CA 90277

## ADDRESS

136 S. BROADWAY

## NAME

KEISHI IKEDA

## TITLE(S)

TREASURER (OR EQUIVALENT OF)

## CITY

REDONDO BEACH

## STATE

CA 90277

## ADDRESS

136 S. BROADWAY

## NAME

TAKEHISA NAITO

## TITLE(S)

DIRECTOR

## CITY

HOLLYWOOD

## STATE

CA 90028

## ADDRESS

1619 N. LA BREA AVE., #614

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**Signature of Officer or  
Other Authorized Signature

Title

TREASURER

Date

1/22/2014

Nevada Secretary of State List Profit  
Revised 7-31-13

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

MAR, 2015

TO

MAR, 2016

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**"YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)"**

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form

1 Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2 If there are additional officers, attach a list of them to this form.

3 Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

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8 Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ENTITY NUMBER

E0157522012-8



\*100102\*

Filed in the office of Barbara K. Cegavske	Document Number <b>20150073730-98</b>
Secretary of State State of Nevada	Filing Date and Time <b>02/18/2015 3:33 PM</b>

Entity Number

E0157522012-8

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)	CITY LOS ANGELES	STATE CA	ZIP CODE 90028
ADDRESS 1619 N LABREA AVE #614 , USA				
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
ADDRESS 136 S. BROADWAY , USA				
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
ADDRESS 136 S. BROADWAY , USA				
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR	CITY LOS ANGELES	STATE CA	ZIP CODE 90028
ADDRESS 1619 N LABREA AVE #614 , USA				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title

CFO

Date

2/18/2015 3:33:04 PM

Nevada Secretary of State List Profit  
Revised 1-5-15

## (PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

CAMEL COINS, INC.  
NAME OF CORPORATION

FOR THE FILING PERIOD OF MAR, 2016 TO MAR, 2017

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**"YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)"**

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**IMPORTANT: Read instructions before completing and returning this form.**

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2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

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8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

ENTITY NUMBER

E0157522012-8



\*100103\*

Filed in the office of <i>Barbara K Cegavske</i>	Document Number <b>20160067966-23</b>
Barbara K. Cegavske Secretary of State State of Nevada	Filing Date and Time <b>02/16/2016 8:07 AM</b>
	Entity Number <b>E0157522012-8</b>

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

<b>NRS 76.020 Exemption Codes</b>			
001 - Governmental Entity	005 - Motion Picture Company		
006 - NRS 680B.020 Insurance Co.			
<b>TITLE(S)</b>			
<b>PRESIDENT (OR EQUIVALENT OF)</b>			
NAME TAKEHISA NAITO	CITY LOS ANGELES	STATE CA	ZIP CODE 90028
ADDRESS 1619 N LABREA AVE #614 , USA			
<b>TITLE(S)</b>		<b>SECRETARY (OR EQUIVALENT OF)</b>	
NAME KEISHI IKEDA	CITY REDONDO BEACH	STATE CA	ZIP CODE 90277
ADDRESS 136 S. BROADWAY , USA			
<b>TITLE(S)</b>		<b>TREASURER (OR EQUIVALENT OF)</b>	
NAME TAKEHISA NAITO	CITY LOS ANGELES	STATE CA	ZIP CODE 90028
ADDRESS 1619 N LABREA AVE #614 , USA			
<b>TITLE(S)</b>		<b>DIRECTOR</b>	
NAME TAKEHISA NAITO	CITY LOS ANGELES	STATE CA	ZIP CODE 90028
ADDRESS 1619 N LABREA AVE #614 , USA			

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title:  TAKEHISA NAITO Date:  2/16/2016 8:07:21 AM

Nevada Secretary of State List Profit  
Revised 7-1-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

**CAMEL COINS, INC.**  
NAME OF CORPORATION

FOR THE FILING PERIOD OF **MAR, 2017** TO **MAR, 2018**

ENTITY NUMBER

**E0157522012-8**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form.**

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2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
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7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201. (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 6808.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>			
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>	
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>			
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>	
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>			
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>	
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>			
ADDRESS <b>1930 WILSHIRE BLVD, SUITE 400 , USA</b>	CITY <b>LOS ANGELES</b>	STATE <b>CA</b>	ZIP CODE <b>90057</b>	

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** **TAKEHISA NAITO**

**Signature of Officer or  
Other Authorized Signature**

Title  
**PRESIDENT** Date  
**3/16/2017 9:49:18 AM**

Nevada Secretary of State List Profit  
Revised: 7-1-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

**CAMEL COINS, INC.**  
NAME OF CORPORATION

FOR THE FILING PERIOD OF **MAR, 2017** TO **MAR, 2018**

ENTITY NUMBER

**E0157522012-8**

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

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2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
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**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>			
ADDRESS 1619 N. LA BREA AVE, APT. #614	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>	
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>			
ADDRESS 8760 W. PATRICK LANE, UNIT 2016	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>	
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>			
ADDRESS 8760 W. PATRICK LANE, UNIT 2016	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>	
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>			
ADDRESS 1619 N. LA BREA AVE, APT. #614	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>	

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** **TAKEHISA NAITO**

**Signature of Officer or  
Other Authorized Signature**

Title **PRESIDENT** Date **6/2/2017 10:47:34 AM**

Nevada Secretary of State List Profit  
Revised: 7-1-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF MAR, 2018 TO MAR, 2019

ENTITY NUMBER

E0157522012-8



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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006 - NRS 680B.020 Insurance Co.

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- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS <b>8760 W. PATRICK LANE, UNIT 2016</b>	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89148</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS <b>1619 N. LA BREA AVE, APT. #614</b>	CITY <b>HOLLYWOOD</b>	STATE <b>CA</b>	ZIP CODE <b>90028</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X TAKEHISA NAITO****Signature of Officer or  
Other Authorized Signature**

Title  
**PRESIDENT**

Date  
**2/7/2018 6:51:57 AM**Nevada Secretary of State List Profit  
Form. 100103 Revised: 7-1-17

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:**

CAMEL COINS, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF

MAR, 2019

TO

MAR, 2020

ENTITY NUMBER

E0157522012-8



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

This corporation is a publicly traded corporation. The Central Index Key number is:

This publicly traded corporation is not required to have a Central Index Key number.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>		
ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132	CITY <b>LAS VEGAS</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X** TAKEHISA NAITO

**Signature of Officer or  
Other Authorized Signature**

Title  
**PRESIDENT**

Date  
**2/26/2019 3:02:29 PM**

Nevada Secretary of State List Profit  
Form 100103 Revised: 7-1-17

3425801

## ARTICLES OF INCORPORATION

### Article I

The name of the corporation is: Camel Coins

**FILED**  
In the office of the Secretary of State  
of the State of California

NOV 08 2011

### Article II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

### Article III

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is five thousand (5,000), with a one dollar (\$1.00) par value per share.

### Article IV

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

### Article V

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



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BY: Mark Williams, A.V.P.



**State of California  
Secretary of State**

**S****E-H54922****FILED**

In the office of the Secretary of State of the State of California

**Nov - 30 2011**

This Space For Filing Use Only

**Statement of Information**

(Domestic Stock and Agricultural Cooperative Corporations)

**FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.****IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****1. CORPORATE NAME**C3425801  
CAMEL COINS**Due Date:****Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD. SUITE 400 LOS ANGELES CA 90057	CITY	STATE	ZIP CODE
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD. SUITE 400 LOS ANGELES CA 90057	CITY	STATE	ZIP CODE
4. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

5. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO 6260 W 3RD ST. #407 LOS ANGELES, CA 90036	ADDRESS	CITY	STATE	ZIP CODE
6. SECRETARY TAKEHISA NAITO 6260 W 3RD ST. #407 LOS ANGELES, CA 90036	ADDRESS	CITY	STATE	ZIP CODE
7. CHIEF FINANCIAL OFFICER/ TAKEHISA NAITO 6260 W 3RD ST. #407 LOS ANGELES CA 90036	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

8. NAME TAKEHISA NAITO 6260 W 3RD ST. #407 LOS ANGELES, CA 90036	ADDRESS	CITY	STATE	ZIP CODE
9. NAME 	ADDRESS	CITY	STATE	ZIP CODE
10. NAME 	ADDRESS	CITY	STATE	ZIP CODE

**11. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:****Agent for Service of Process** (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California street address (a P.O.Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.)**12. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

**13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL**

CITY STATE ZIP CODE

**Type of Business****14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**

MR. NAITO HAS EXPERIENCE IN FI

**15. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.**

11/30/2011

TAKEHISA NAITO

PRESIDENT

DATE

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

TITLE

SIGNATURE

DISS STK



**State of California  
Secretary of State**

*C 3425801*  
**Domestic Stock Corporation  
Certificate of Dissolution**

**There is no fee for filing a Certificate of Dissolution.**

**IMPORTANT - Read Instructions before completing this form.**

D 1187451

*9/13*  
**FILED**

**Secretary of State  
State of California**

**MAY 13 2013**

This Space For Filing Use Only

**Corporate Name:** (Enter the name of the domestic stock corporation exactly as it is of record with the California Secretary of State.)

1. Name of corporation:

**CAMEL COINS**

**Required Statements** (The following statements are required by statute and should not be altered.)

2. A final franchise tax return, as described by California Revenue and Taxation Code section 23332, has been or will be filed with the California Franchise Tax Board, as required under the California Revenue and Taxation Code, Division 2, Part 10.2 (commencing with Section 18401). The corporation has been completely wound up and is dissolved.

**Debts & Liabilities** (Check the applicable statement. Note: Only one box may be checked.)

3.  The corporation's known debts and liabilities have been actually paid.

The corporation's known debts and liabilities have been paid as far as its assets permitted.

The corporation's known debts and liabilities have been adequately provided for by their assumption and the name and address of the assumer is \_\_\_\_\_

The corporation's known debts and liabilities have been adequately provided for as far as its assets permitted.

(Specify in an attachment to this certificate (incorporated herein by this reference) the provision made and the address of the corporation, person or governmental agency that has assumed or guaranteed the payment, or the name and address of the depositary with which deposit has been made or other information necessary to enable creditors or others to whom payment is to be made to appear and claim payment.)

The corporation never incurred any known debts or liabilities.

**Assets** (Check the applicable statement. Note: Only one box may be checked.)

4.  The known assets have been distributed to the persons entitled thereto.

The corporation never acquired any known assets.

**Election** (Check the "YES" or "NO" box, as applicable. Note: If the "NO" box is checked, a Certificate of Election to Wind Up and Dissolve pursuant to Corporations Code section 1901 must be filed prior to or together with this Certificate of Dissolution.)

5. The election to dissolve was made by the vote of all the outstanding shares.  YES  NO

**Verification & Execution** (If additional signature space is necessary, the dated signature(s) with verification(s) may be made on an attachment to this certificate. Any attachments to this certificate are incorporated herein by this reference.)

6. The undersigned constitute(s) the sole director or a majority of the directors now in office. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.

*4/29/2013*

Date

Signature of Director

Takehisa Naito

Type or Print Name of Director

Signature of Director

Type or Print Name of Director

Signature of Director

Type or Print Name of Director

S&DC-S/N	Statement and Designation by Foreign Corporation
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To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:

- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and
- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. Note: If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

3606651  
FILED  
IN THE OFFICE OF THE  
SECRETARY OF STATE  
OF THE STATE OF CALIFORNIA  
*cr/leg*

1PC SEP 25 2013

This Space For Office Use Only

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm).

**Corporate Name** (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]. For general corporate name requirements and restrictions in California, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).)

① CAMEL COINS, INC.

#### Corporate History

② State or foreign country where this corporation was formed: Nevada

**Service of Process** (List a California resident or an active 1505 corporation in California that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may **not** list your own corporation as the agent. Do not list an address if the agent is a 1505 corporation.)

③ a. Business Filings Incorporated

Agent's Name

b.

Agent's Street Address (if agent is not a corporation)

City (no abbreviations)

State Zip

CA

The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.

#### Corporate Addresses

④ a. 2780 S. Jones Blvd #3695, Las Vegas, Nevada 89146

Street Address of Principal Executive Office

City (no abbreviations)

State Zip

CA

b.

Street Address of Principal Office in California, if any

City (no abbreviations)

State Zip

c.

Mailing Address of Principal Executive Office, if different from 4a or 4b

City (no abbreviations)

State Zip

CA

Read and sign below: This form must be signed by an officer of the foreign corporation.

Takehisa Naito

President

Sign here

Print your name here

Your business title

Make check/money order payable to: Secretary of State

By Mail

Drop-Off

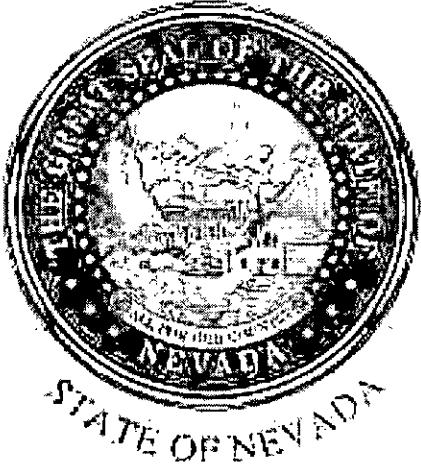
Upon filing, we will return one ('1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

Secretary of State  
Business Entities, P.O. Box 944260  
Sacramento, CA 94244-2600

Secretary of State  
1500 11th Street, 3rd Floor  
Sacramento, CA 95814

3606651

SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CAMEL COINS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 19, 2012, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 23, 2013.

A handwritten signature of Ross Miller.

ROSS MILLER  
Secretary of State

Electronic Certificate

Certificate Number: C20130923-1749

You may verify this electronic certificate  
online at <http://www.nvsos.gov/>



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****FX86890****FILED**In the office of the Secretary of State  
of the State of California**JUL-06 2018****1. CORPORATE NAME**

CAMEL COINS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C3606651

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

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**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 2780 S. JONES BLVD #3695, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 1619 N. LA BREA AVE, APT. #614, HOLLYWOOD, CA 90028	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 8760 W. PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148	CITY	STATE	ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
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**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

07/06/2018

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****GA97645****FILED**In the office of the Secretary of State  
of the State of California**NOV-25 2019****1. CORPORATE NAME**

CAMEL COINS, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C3606651

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

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5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

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10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

11/25/2019

KEISHI IKEDA

CFO

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 80

# **ATTACHMENT C**



**ROSS MILLER**  
**Secretary of State**  
**204 North Carson Street, Suite 4**  
**Carson City, Nevada 89701-4520**  
**(775) 684 5708**  
**Website: www.nvsos.gov**

## Articles of Incorporation (PURSUANT TO NRS CHAPTER 78)

Filed in the office of 	Document Number <b>20120116859-95</b>
Filing Date and Time <b>02/21/2012 8:00 AM</b>	Entity Number <b>E0097152012-0</b>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b> Sea Mirror, Inc.			
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent <b>Business Filings Incorporated</b> Name _____  <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below)  Name of Noncommercial Registered Agent <b>OR</b> Name of Title of Office or Other Position with Entity Street Address _____ City _____ Nevada _____ Zip Code _____ Mailing Address (if different from street address) _____ City _____ Nevada _____ Zip Code _____		
	Number of shares with par value: <b>2000</b> Par value per share: \$ <b>0.01</b> Number of shares without par value: _____		
	<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)		
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name _____ Street Address _____ City _____ Nevada _____ Zip Code _____ 2) _____ Name _____ Street Address _____ City _____ State _____ Zip Code _____		
	<b>5. Purpose:</b> (optional; see instructions) <i>The purpose of the corporation shall be:</i> To engage in any lawful act or activity for which a corporation may be organized under Chapter 78 of NRS.		
<b>6. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	Business Filings Incorporated Name _____ Address _____ City _____ WI _____ 53717 <b>X</b> <i>Mark Williams</i> _____ Mark Williams, AVP Incorporator Signature		
	<b>7. Certificate of Acceptance of Appointment of Registered Agent:</b> <i>I hereby accept appointment as Registered Agent for the above named Entity.</i> <b>X</b> <i>Mark Williams</i> _____ Mark Williams, AVP, Business Filings Incorporated Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity		
February 20, 2012 Date			

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 78 Articles  
Revised: 4-10-09

SEA MIRROR, INC.

E0097152012-0

NAME OF CORPORATION

FOR THE FILING PERIOD OF  TO **\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov)\*\***

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

BUSINESS FILINGS INCORPORATED (Commercial Registered Agent)  
311 S DIVISION ST  
CARSON CITY, NV 89703 USA

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: [www.nvsos.gov](http://www.nvsos.gov)

\*100101\*

Filed in the office of 	Document Number <b>20120123225-80</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>02/22/2012 3:06 PM</b>
Entity Number <b>E0097152012-0</b>	

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

USE BLACK INK ONLY - DO NOT HIGHLIGHT

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT: Read instructions before completing and returning this form.**

- Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
- If there are additional officers, attach a list of them to this form.
- Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by the last day of the first month following the incorporation/initial registration with this office.
- State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
- Make your check payable to the Secretary of State.
- Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
- Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of filing.

INITIAL LIST FILING FEE: \$125.00

LATE PENALTY: \$75.00

BUSINESS LICENSE FEE: \$200.00

LATE PENALTY: \$100.00

**CHECK ONLY IF APPLICABLE**

- Pursuant to NRS, this corporation is exempt from the business license fee. Exemption code:
- Month and year your State Business License expires:  20
- This corporation is a publicly traded corporation. The Central Index Key number is:
- This publicly traded corporation is not required to have a Central Index Key number.

**Section 7(2) Exemption Codes**

- 001 - Governmental Entity  
002 - 501(c) Nonprofit Entity  
003 - Home-based Business  
004 - Natural Person with 4 or less rental dwelling units  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 2780 S. JONES BLVD. SUITE200 #3692	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 TAKEHISA NAITO

Title PRESIDENT	Date 2/22/2012 2:59:49 PM
--------------------	------------------------------

**Signature of Officer**

Nevada Secretary of State Initial List Profit  
Revised: 8-5-09

## (PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

SEA MIRROR, INC.

NAME OF CORPORATION

E0097152012-0

FILE NUMBER

FOR THE FILING PERIOD OF 2013 TO 2014. DUE BY 2/28/2013

File list with the NEVADA SECRETARY OF STATE

\*\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsos.gov](http://www.nvsos.gov) \*\*\*

The entity's duly appointed agent in the state of NEVADA upon whom process can be served is:

BUSINESS FILINGS INCORPORATED  
311 S DIVISION ST  
CARSON CITY NV 89703

Filed in the office of

Ross Miller  
Secretary of State  
State of Nevada

Document Number

20130111213-15

Filing Date and Time

02/19/2013 5:47 AM

Entity Number

E0097152012-0

ABOVE SPACE IS FOR OFFICE USE ONLY

 Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)**IMPORTANT: Read instructions before completing and returning this form**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED. USE BLACK INK ONLY - DO NOT HIGHLIGHT
2. If there are additional officers, attach a list of them to this form.
3. Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State Business License fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- |  |                                   |
|--|-----------------------------------|
| <input type="checkbox"/> Pursuant to NRS, this entity is exempt from the business license fee. Exemption Code: _____   | <b>NRS 76.020 Exemption Codes</b> |
| NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. |                                   |
| <input type="checkbox"/> This corporation is a publicly traded corporation. The Central Index Key number is: _____   | 001 - Governmental Entity         |
| <input type="checkbox"/> This publicly traded corporation is not required to have a Central Index Key number.  | 005 - Motion Picture Company      |
|  | 006 - NRS 680B.020 Insurance Co.  |

ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00	BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00																																																
<table border="0"> <tr> <td>TAKEHISA NAITO</td> <td>TITLE(S)</td> </tr> <tr> <td>NAME: _____</td> <td>SECRETARY (OR EQUIVALENT OF)</td> </tr> <tr> <td>2780 S. JONES BLVD. SUITE200 #3692</td> <td>LAS VEGAS</td> <td>NV</td> <td>89146</td> </tr> <tr> <td>ADDRESS: _____</td> <td>CITY:</td> <td>ST:</td> <td>ZIP:</td> </tr> <tr> <td>TAKEHISA NAITO</td> <td>TITLE(S)</td> </tr> <tr> <td>NAME: _____</td> <td>SECRETARY (OR EQUIVALENT OF)</td> </tr> <tr> <td>2780 S. JONES BLVD. SUITE200 #3692</td> <td>LAS VEGAS</td> <td>NV</td> <td>89146</td> </tr> <tr> <td>ADDRESS: _____</td> <td>CITY:</td> <td>ST:</td> <td>ZIP:</td> </tr> <tr> <td>TAKEHISA NAITO</td> <td>TITLE(S)</td> </tr> <tr> <td>NAME: _____</td> <td>TREASURER (OR EQUIVALENT OF)</td> </tr> <tr> <td>2780 S. JONES BLVD. SUITE200 #3692</td> <td>LAS VEGAS</td> <td>NV</td> <td>89146</td> </tr> <tr> <td>ADDRESS: _____</td> <td>CITY:</td> <td>ST:</td> <td>ZIP:</td> </tr> <tr> <td>TAKEHISA NAITO</td> <td>TITLE(S)</td> </tr> <tr> <td>NAME: _____</td> <td>DIRECTOR</td> </tr> <tr> <td>2780 S. JONES BLVD. SUITE200 #3692</td> <td>LAS VEGAS</td> <td>NV</td> <td>89146</td> </tr> <tr> <td>ADDRESS: _____</td> <td>CITY:</td> <td>ST:</td> <td>ZIP:</td> </tr> </table>		TAKEHISA NAITO	TITLE(S)	NAME: _____	SECRETARY (OR EQUIVALENT OF)	2780 S. JONES BLVD. SUITE200 #3692	LAS VEGAS	NV	89146	ADDRESS: _____	CITY:	ST:	ZIP:	TAKEHISA NAITO	TITLE(S)	NAME: _____	SECRETARY (OR EQUIVALENT OF)	2780 S. JONES BLVD. SUITE200 #3692	LAS VEGAS	NV	89146	ADDRESS: _____	CITY:	ST:	ZIP:	TAKEHISA NAITO	TITLE(S)	NAME: _____	TREASURER (OR EQUIVALENT OF)	2780 S. JONES BLVD. SUITE200 #3692	LAS VEGAS	NV	89146	ADDRESS: _____	CITY:	ST:	ZIP:	TAKEHISA NAITO	TITLE(S)	NAME: _____	DIRECTOR	2780 S. JONES BLVD. SUITE200 #3692	LAS VEGAS	NV	89146	ADDRESS: _____	CITY:	ST:	ZIP:
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I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 18 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X

Signature of Officer

Title C.E.O.

Date 1/20/13

Nevada Secretary of State Annual List Profit Revised: 3-15-12



**ROSS MILLER**  
**Secretary of State**  
**204 North Carson Street, Suite 1**  
**Carson City, Nevada 89701-4520**  
**(775) 684 5708**  
**Website: [www.nvsos.gov](http://www.nvsos.gov)**

## **Certificate of Dissolution**

(PURSUANT TO NRS 78.575)

Filed in the office of

Ross Miller  
 Secretary of State  
 State of Nevada

Document Number  
**20130241620-91**Filing Date and Time  
**04/08/2013 8:03 AM**Entity Number  
**E0097152012-0**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

**Certificate of Dissolution**  
**For a Nevada Profit Corporation**  
**Before Payment of Capital and Beginning of Business**  
**(Pursuant to NRS 78.575)**

*The undersigned certify that the following information is correct:*

1. Name of corporation:

Sea Mirror, Inc.

2. No part of the capital has been paid.

3. Business has not begun.

4. The undersigned comprise a majority of the incorporators or of the board of directors.

5. The undersigned incorporators or directors\* desire to dissolve said corporation:

Takehisa Naito, Director

Name of incorporator or director

X

Signature

Name of incorporator or director

X

Signature

Name of incorporator or director

X

Signature

\*attach a plain 8 1/2" x 11" sheet to list additional incorporators or directors.

**FILING FEE: \$75.00**

**IMPORTANT:** Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected.

*This form must be accompanied by appropriate fees.*

Nevada Secretary of State Dissolution Profit-Before  
Revised: 3-8-09



BARBARA K. CEGAVSKE  
Secretary of State  
202 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684-5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)



\*040105\*

Filed in the Office of	Business Number
<i>Barbara K. Cegavske</i>	E0488742018-0
Secretary	Filing Number
State Of Nevada	20180454187-40
Filed On	10/17/2018
Number of Pages	1

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	Sea Mirror, Inc.		
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated Name _____ <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below)  Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity _____		
	Street Address	City	Nevada Zip Code
	Mailing Address (if different from street address)	City	Nevada Zip Code
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with par value: 2,000	Par value per share: \$ 0.01	Number of shares without par value: _____
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name _____ 2780 South Jones Boulevard, Suite 200-3132 Las Vegas NV 89109 Street Address City State Zip Code 2) _____ Name _____ Street Address City State Zip Code		
5. Purpose: (optional; required only if Benefit Corporation status selected)	The purpose of the corporation shall be: All Lawful Business		
6. Benefit Corporation: (see instructions)	<input type="checkbox"/> Yes		
7. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRB 238.330, it is a category C felony to knowingly offer a false or forged instrument for filing in the Office of the Secretary of State. Takehisa Naito Name _____ 2780 South Jones Boulevard, Suite 200-3133 Las Vegas NV 89109 Address City State Zip Code		
8. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. X <i>Mark Williams</i> , AVP, Business Filings, Incorporated Authorised Signature of Registered Agent or On Behalf of Registered Agent Entity Date 09/10/2018		

This form must be accompanied by appropriate fees.

 Nevada Secretary of State NRS 78 Articles  
 Revised: 1-6-16



\*140503\*



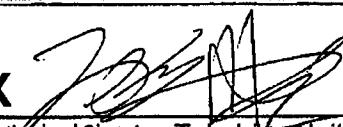
**BARBARA K. CEGAVSKE**  
**Secretary of State**  
**202 North Carson Street**  
**Carson City, Nevada 89701-4201**  
**(775) 684-5708**  
**Website: www.nvsos.gov**

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number <b>E0488742018-0</b>
	Filing Number <b>20180454188-51</b>
Secretary State Of Nevada	Filed On <b>10/17/2018</b>
	Number of Pages <b>1</b>

## Articles of Domestification (PURSUANT TO NRS 92A.270)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Entity Name and Type of Domestic Entity as set forth in its Constituent Documents:	Sea Mirror, Inc., Corporation
2. Entity Name Before Filing Articles of Domestification:	Sea Mirror, Inc.
3. Date and Jurisdiction of Original Formation:	02/08/2013, California
4. Jurisdiction that Constituted the Principal Place of Business, Central Administration or Equivalent of the Undomesticated Entity Immediately Before Articles of Domestification:	California
5. Signature of Authorized Representative:	<div style="display: flex; align-items: center; justify-content: space-between;"> <span>X</span>  <div style="margin-left: 20px;"> <span>10/14/2018</span>  <span>Date</span> </div> </div>

Filing Fee: \$350.00

**IMPORTANT: This document must be accompanied by the appropriate constituent document for the type of domestic entity described in article 1 above and the filing fees.**

This form must be accompanied by appropriate fees.

 Nevada Secretary of State NRS 92A Domestification  
 Revised: 1-5-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

Sea Mirror, Inc.  
NAME OF CORPORATION

FOR THE FILING PERIOD OF

2018

TO

2019

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov) \*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ABOVE SPACE IS FOR OFFICE USE ONLY

Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number E0488742018-0
Secretary	Filing Number 20180454189-62
State Of Nevada	Filed On 10/17/2018
	Number of Pages 1

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity  
006 - NRS 680B.020 Insurance Co.

**NOTE:** If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME Takechisa Naito	TITLE(S) PRESIDENT (OR EQUIVALENT OF)
ADDRESS 2780 South Jones Boulevard, Suite 200-3132	CITY Las Vegas STATE NV ZIP CODE 89109
NAME Keishi Ikeda	TITLE(S) SECRETARY (OR EQUIVALENT OF)
ADDRESS 2780 South Jones Boulevard, Suite 200-3133	CITY Las Vegas STATE NV ZIP CODE 89109
NAME Keishi Ikeda	TITLE(S) TREASURER (OR EQUIVALENT OF)
ADDRESS 2780 South Jones Boulevard, Suite 200-3133	CITY Las Vegas STATE NV ZIP CODE 89109
NAME Takechisa Naito	TITLE(S) DIRECTOR
ADDRESS 2780 South Jones Boulevard, Suite 200-3132	CITY Las Vegas STATE NV ZIP CODE 89109

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X   
Signature of Officer or  
Other Authorized Signature

Title  President Date  10-4-2018

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

FEB 08 2013

**ARTICLES OF INCORPORATION****Article I**

The name of the corporation is: Sea Mirror, Inc.

**Article II**

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

**Article III**

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

**Article IV**

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

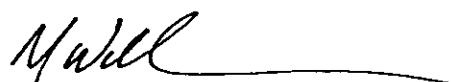
**Article V**

The initial business and mailing address of the corporation is: 1150 South Olive St. Suite 2000, Los Angeles, California 90015

**Article VI**

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.



# State of California Secretary of State

S

E-R84123

FILED

**Statement of Information**  
(Domestic Stock and Agricultural Cooperative Corporations)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

In the office of the Secretary of State of the State of California

Apr - 11 2013

This Space For Filing Use Only

**1. CORPORATE NAME**

SEA MIRROR, INC.

1150 SOUTH OLIVE ST.  
LOS ANGELES CA 90015**2. CALIFORNIA CORPORATE NUMBER** C3533409

No Change Statement ( Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

 If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to item 17.
**Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)**

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
---	------	-------	----------

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

**Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO	1150 SOUTH OLIVE ST. SUITE 2000 LOS ANGELES CA 90015			

11. NAME	ADDRESS	CITY	STATE	ZIP CODE
----------	---------	------	-------	----------

12. NAME	ADDRESS	CITY	STATE	ZIP CODE
----------	---------	------	-------	----------

**13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O.Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

**14. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business****16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**

BUSINESS CONSULTING

**17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.**

04/11/2013

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SI-200 (REV 01/2012)

APPROVED BY SECRETARY OF STATE

PX19 - 90



**Secretary of State  
Statement of Information  
(California Stock, Agricultural  
Cooperative and Foreign Corporations)**

SI-550

47

**IMPORTANT -- Read instructions before completing this form.**

**Fees (Filing plus Disclosure) - \$25.00;**

**Copy Fees - First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00 plus copy fees**

**1. Corporation Name** (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State)

Sea Mirror, Inc.

**3. Business Addresses**

a. Street Address of Principal Executive Office - Do not list a P.O. Box 355 S. Grand Ave. Ste. 2450	City (no abbreviations) Los Angeles	State CA	Zip Code 90071
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box	City (no abbreviations)	State CA	Zip Code

**4. Officers**

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ Takehisa	First Name	Middle Name	Last Name Naito	Suffix
Address 1619 N. La Brea Ave #614	City (no abbreviations) Hollywood			State CA
b. Secretary Keishi	First Name	Middle Name	Last Name Ikeda	Suffix
Address 8760 W. Patrick Lane Unit 2016	City (no abbreviations) Las Vegas			State NV
c. Chief Financial Officer/ Keishi	First Name	Middle Name	Last Name Ikeda	Suffix
Address 8760 W. Patrick Lane Unit 2016	City (no abbreviations) Las Vegas			State NV

**5. Director(s)**

California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).

a. First Name Takehisa	Middle Name	Last Name Naito	Suffix
Address 1619 N. La Brea Ave #614	City (no abbreviations) Hollywood		
b. Number of Vacancies on the Board of Directors, if any			

**6. Agent for Service of  
Process**

Item 6a and 6b: If the agent is an individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box	City (no abbreviations)		
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete item 6a or 6b			
Business Filings Incorporated			

**7. Type of Business**

Describe the type of business or services of the Corporation

Business Consulting

**8. The information contained herein, including in any attachments, is true and correct.**

June 13, 2017

Takehisa Naito

President

Date

Type or Print Name of Person Completing the Form

Title

Signature

SI-550 (REV 11/2016)

2016 California Secretary of State  
www.sos.ca.gov/business/be

Y2

Statement of Information  
Sea Mirror, Inc.

4. Officers:

Vice President: Takehisa Naito, 1619 N. La Brea Ave #614, Hollywood, California 90028

President: Takehisa Naito, 1619 N. La Brea Ave #614, Hollywood, California 90028

Treasurer: Keishi Ikeda, 8760 W. Patrick Lane, Unit 2016, Las Vegas, Nevada 89148

A handwritten signature consisting of stylized initials, possibly 'M' and 'Z'.



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

### Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

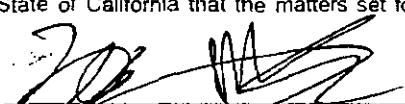
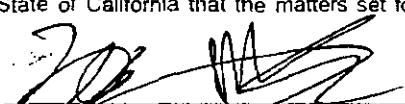
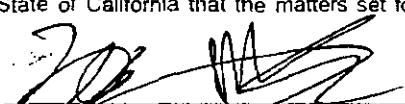
### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE
SI-200 (REV 01/2013)	Page 1 of 1		Dx_Fq_93
			APPROVED BY SECRETARY OF STATE

D1482627

 <p><b>Secretary of State Certificate of Dissolution (California Stock Corporation ONLY)</b></p>		<b>DISS STK</b>												
<p><b>IMPORTANT — Read Instructions before completing this form.</b></p> <p>There is No Fee for filing a Certificate of Dissolution - Stock</p> <p><b>Copy Fees</b> – First page \$1.00; each attachment page \$0.50. Certification Fee - \$5.00 plus copy fees</p>														
<i>1PL</i> This Space For Office Use Only <b>FILED NH 10/9</b> <b>Secretary of State State of California</b> <b>NOV 15 2018</b>														
<p><b>1. Corporate Name</b> (Enter the exact name of the Corporation as it is recorded with the California Secretary of State.)  Sea Mirror, Inc.</p>		<p><b>2. 7-Digit Secretary of State File Number</b>  C3533409</p>												
<p><b>3. Election</b></p> <p><input checked="" type="checkbox"/> The dissolution was made by a vote of ALL of the shareholders of the California corporation.  <small>Note: If the above box is not checked, a Certificate of Election to Wind Up and Dissolve (Form ELEC STK) must be filed prior to or together with this Certificate of Dissolution. (California Corporations Code section 1801.)</small></p>														
<p><b>4. Debts and Liabilities</b> (Check the applicable statement. Only one box may be checked. If second box is checked, must include the required information in an attachment.)</p> <p><input checked="" type="checkbox"/> The known debts and liabilities have been actually paid or paid as far as its assets permitted.  <input type="checkbox"/> The known debts and liabilities have been adequately provided for in full or as far as its assets permitted by their assumption. Included in the attachment to this certificate, incorporated herein by this reference, is a description of the provisions made and the name and address of the person, corporation or government agency that has assumed or guaranteed the payment, or the depository institution with which deposit has been made.  <input type="checkbox"/> The corporation never incurred any known debts or liabilities.</p>														
<p><b>5. Required Statements</b> (Do not alter the Required Statements – ALL must be true to file Form DISS STK.)</p> <p>a. The Corporation has been completely wound up and is dissolved.  b. All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.  c. The known assets have been distributed to the persons entitled thereto or the corporation acquired no known assets.</p>														
<p><b>6. Read, Verify, Date and Sign Below</b> (See Instructions for signature requirements.)</p> <p>The undersigned is the sole director or a majority of the directors now in office.. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>11/13/18</u></td> <td style="width: 40%;"></td> <td style="width: 40%;">Takehisa Naito</td> </tr> <tr> <td>Date</td> <td>Signature</td> <td>Type or Print Name</td> </tr> <tr> <td><hr/></td> <td><hr/></td> <td><hr/></td> </tr> <tr> <td><hr/></td> <td><hr/></td> <td><hr/></td> </tr> </table>			<u>11/13/18</u>		Takehisa Naito	Date	Signature	Type or Print Name	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<u>11/13/18</u>		Takehisa Naito												
Date	Signature	Type or Print Name												
<hr/>	<hr/>	<hr/>												
<hr/>	<hr/>	<hr/>												

4258692

 <b>Secretary of State</b> <b>Statement and Designation by</b> <b>Foreign Corporation</b>	<b>S&amp;DC-S/N</b>
<p><b>IMPORTANT — Read Instructions before completing this form.</b></p> <p>Must be submitted with a current Certificate of Good Standing issued by the government agency where the corporation was formed. See Instructions.</p> <p><b>Filing Fee</b> — \$100.00 (for a foreign stock corporation) or \$30.00 (for a foreign nonprofit corporation)</p> <p><b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00</p> <p>Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>	

**FILED MC****Secretary of State  
State of California****MAR 25 2019****(P)****1PC****This Space For Office Use Only**

- 1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

Sea Mirror, Inc.	Nevada
------------------	--------

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box 2780 South Jones Boulevard Suite 200-3692	City (no abbreviations) Las Vegas	State NV	Zip Code 89146
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

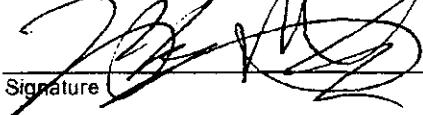
CORPORATION – Complete item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete item 4a or 4b

Business Filings Incorporated

**5. Read and Sign Below** (See Instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

  
Signature

Takchisa Naito, President

Type or Print Name

4258692



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SEA MIRROR, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 17, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 22, 2019.

A handwritten signature in black ink that reads "Barbara K. Cegavske".

Barbara K. Cegavske  
Secretary of State



Electronic Certificate  
Certificate Number: C20190322-0030



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****G588776****FILED**In the office of the Secretary of State  
of the State of California**APR-19 2019****1. CORPORATE NAME**

SEA MIRROR, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258692

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
2780 SOUTH JONES BOULEVARD SUITE 200-3692, LAS VEGAS, NV 89146			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
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6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
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**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89146				

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146				

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146				

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
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**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 97



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****GC39535****FILED**In the office of the Secretary of State  
of the State of California**JAN-21 2020****1. CORPORATE NAME**

SEA MIRROR, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258692

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/21/2020

TAKEHISA NAITO

CEO

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 98

# **ATTACHMENT D**



\*040105\*



**BARBARA K. CEGAVSKE**  
**Secretary of State**  
**202 North Carson Street**  
**Carson City, Nevada 89701-4201**  
**(775) 684-5708**  
**Website: www.nvsos.gov**

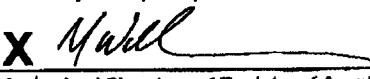
Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number E0472392018-9
	Filing Number 20180440620-17
Secretary State Of Nevada	Filed On 10/05/2018
	Number of Pages 1

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Corporation:	Naito, Corp.		
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: Business Filings Incorporated Name _____ <input type="checkbox"/> Noncommercial Registered Agent (name and address below)      OR <input type="checkbox"/> Office or Position with Entity (name and address below)		
	Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity Street Address _____ City _____ Zip Code _____ Nevada _____ Mailing Address (if different from street address) _____ City _____ Zip Code _____ Nevada _____		
3. Authorized Stock: (number of shares corporation is authorized to issue)	Number of shares with par value: _____	Par value per share: \$ _____	Number of shares without par value: _____ 100,000
4. Names and Addresses of the Board of Directors/Trustees: (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) Takehisa Naito Name _____ 2780 South Jones Boulevard, Suite 200-3132      Las Vegas      NV      89109 Street Address      City      State      Zip Code 2) _____ Name _____ Street Address _____ City _____ State _____ Zip Code _____		
5. Purpose: (optional; required only if Benefit Corporation status selected)	The purpose of the corporation shall be: All Lawful Business		
6. Benefit Corporation: (see instructions)	<input type="checkbox"/> Yes		
7. Name, Address and Signature of Incorporator: (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. Takchisa Naito  Name _____ 2780 South Jones Boulevard, Suite 200-3132      Las Vegas      NV      89109 Address      City      State      Zip Code		
8. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity.  Mark Williams, AVP Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity      09 10 2018 Date		

This form must be accompanied by appropriate fees.

 Nevada Secretary of State NRS 78 Articles  
 Revised: 1-5-15



\*140503\*



**BARBARA K. CEGAVSKE**  
**Secretary of State**  
**202 North Carson Street**  
**Carson City, Nevada 89701-4201**  
**(775) 684-5708**  
**Website: [www.nvsos.gov](http://www.nvsos.gov)**

Filed in the Office of <i>Barbara K. Cegavske</i>	Business Number <b>E0472392018-9</b>
	Filing Number <b>20180440619-85</b>
Secretary State Of Nevada	Filed On <b>10/05/2018</b>
	Number of Pages <b>1</b>

## Articles of Domestification (PURSUANT TO NRS 92A.270)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Entity Name and Type of Domestic Entity as set forth in its Constituent Documents:	Naito, Corp.
2. Entity Name Before Filing Articles of Domestification:	Naito, Corp.
3. Date and Jurisdiction of Original Formation:	07/28/2006, California
4. Jurisdiction that Constituted the Principal Place of Business, Central Administration or Equivalent of the Undomesticated Entity Immediately Before Articles of Domestification:	California
5. Signature of Authorized Representative:	<div style="display: flex; align-items: center;"> <span style="margin-right: 10px;"><input checked="" type="checkbox"/></span>  <div style="margin-left: 10px;"> <span style="border: 1px solid black; padding: 2px;">10-4-2018</span>  <span style="border: 1px solid black; padding: 2px;">Date</span> </div> </div>

Filing Fee: \$350.00

**IMPORTANT: This document must be accompanied by the appropriate constituent document for the type of domestic entity described in article 1 above and the filing fees.**

This form must be accompanied by appropriate fees.

 Nevada Secretary of State NRS 92A Domestification  
 Revised: 1-5-15

**(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS  
LICENSE APPLICATION OF:**

Naito, Corp.

NAME OF CORPORATION

FOR THE FILING PERIOD OF \_\_\_\_\_ TO \_\_\_\_\_

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov) \*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form.**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ENTITY NUMBER	
	
Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number E0472392018-9
Secretary State Of Nevada	Filing Number 20180440622-39
	Filed On 10/05/2018
	Number of Pages 1

ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: \_\_\_\_\_

**NRS 76.020 Exemption Codes**

001 - Governmental Entity

006 - NRS 680B.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

- This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_

- This publicly traded corporation is not required to have a Central Index Key number.

NAME Takchisa Naito	TITLE(S) PRESIDENT (OR EQUIVALENT OF)	CITY Las Vegas	STATE NV	ZIP CODE 89109
ADDRESS 2780 South Jones Boulevard, Suite 200-3132				
NAME Keishi Ikeda	TITLE(S) SECRETARY (OR EQUIVALENT OF)	CITY Las Vegas	STATE NV	ZIP CODE 89109
ADDRESS 2780 South Jones Boulevard, Suite 200-3133				
NAME Keishi Ikeda	TITLE(S) TREASURER (OR EQUIVALENT OF)	CITY Las Vegas	STATE NV	ZIP CODE 89109
ADDRESS 2780 South Jones Boulevard, Suite 200-3133				
NAME Takchisa Naito	TITLE(S) DIRECTOR	CITY Las Vegas	STATE NV	ZIP CODE 89109
ADDRESS 2780 South Jones Boulevard, Suite 200-3132				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X 

Signature of Officer or  
Other Authorized Signature

Title \_\_\_\_\_ President \_\_\_\_\_ Date **10-4-2018**

Nevada Secretary of State List Profit  
Form: 100103 Revised: 7-1-17

2900476

**FILED**  
In the office of the Secretary of State  
of the State of California

**ARTICLES OF INCORPORATION**

**ARTICLE ONE**

JUL 28 2006

SS

The name of this Corporation is

NAITO, CORP.

**ARTICLE TWO**

The purpose of this corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

**ARTICLE THREE**

The name and address in this state of this Corporation's initial agent for service of process is:

Young Ham  
3530 Wilshire Blvd., #1200  
Los Angeles, CA 90010

**ARTICLE FOUR**

This Corporation is authorized to issue only one class of shares, which shall be designated "common" shares. The total number of such shares that may be issued is 100,000.

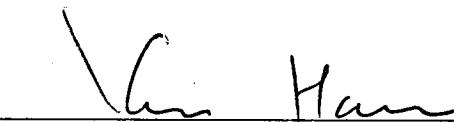
**ARTICLE FIVE**

The liability of the Directors of the Corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

**ARTICLE SIX**

The Corporation is authorized to provide indemnification of agents (as defined in Section 317 of the Corporations Code) for breach of duty to the Corporation and its stockholders through bylaw provisions or through agreements with the agents, or both, in excess of the indemnification otherwise permitted by Section 317 of the Corporations Code, subject to the limits of such excess indemnification set forth in Section 204 of the Corporations Code.

Dated: July 25, 2006

  
\_\_\_\_\_  
Young Ham, Incorporator

12-153312



**State of California  
Secretary of State**

39

S

**Statement of Information**

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

**IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**1. CORPORATE NAME**

Nailo, Corp.

**FILED**

**Secretary of State  
State of California**

**DEC 10 2012**

**2. CALIFORNIA CORPORATE NUMBER**

C2900416

This Space for Filing Use Only

No Change Statement (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4 STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5 STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6 MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7 CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8 SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9 CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)

10 NAME	ADDRESS	CITY	STATE	ZIP CODE
11 NAME	ADDRESS	CITY	STATE	ZIP CODE
12 NAME	ADDRESS	CITY	STATE	ZIP CODE

**13 NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

**14 NAME OF AGENT FOR SERVICE OF PROCESS**

15 STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
---	------	-------	----------

**Type of Business**

**16 DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**

*FINANCIAL SERVICE*

**17 BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.**

12/5/12 Keishi Ikeda

CFO

DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-200 (REV 01/2012)

APPROVED BY SECRETARY OF STATE



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

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4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

#### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE
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# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

FW50285

**FILED**In the office of the Secretary of State  
of the State of California

MAY-04 2018

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

## 1. CORPORATE NAME

NAITO, CORP.

## 2. CALIFORNIA CORPORATE NUMBER

C2900416

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD STE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD STE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 1619 N. LA BREA AVE APT 614, HOLLYWOOD, CA 90028	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 8760 WEST PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 8760 WEST PATRICK LANE UNIT 2016, LAS VEGAS, NV 89148	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME TAKEHISA NAITO	ADDRESS 1619 N. LA BREA AVE APT 614, HOLLYWOOD, CA 90028	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

## 13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS  
BUSINESS FILINGS INCORPORATED

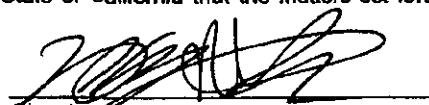
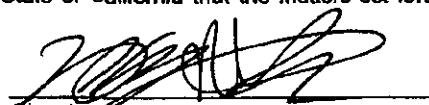
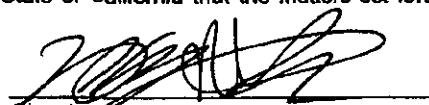
## 15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
BUSINESS CONSULTING

## 17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

05/04/2018      TAKEHISA NAITO      PRESIDENT  
 DATE      TYPE/PRINT NAME OF PERSON COMPLETING FORM      TITLE  
 SIGNATURE 106

01478492

 <p><b>Secretary of State</b>  <b>Certificate of Dissolution</b>          (California Stock Corporation ONLY)</p>	<b>DISS STK</b>									
<p><b>IMPORTANT — Read Instructions before completing this form.</b>          There is No Fee for filing a Certificate of Dissolution - Stock  <b>Copy Fees</b> - First page \$1.00; each attachment page \$0.50;          Certification Fee - \$5.00 plus copy fees</p>										
<p style="text-align: right;">1 PC</p> <p style="text-align: right;"><i>(Handwritten Signature)</i></p> <p><b>This Space For Office Use Only</b></p>										
<p><b>1. Corporate Name</b> (Enter the exact name of the Corporation as it is recorded with the California Secretary of State.)           Naito, Corp.</p>	<p><b>2. 7-Digit Secretary of State File Number</b>           C2900416</p>									
<p><b>3. Election</b></p> <p><input checked="" type="checkbox"/> The dissolution was made by a vote of <b>ALL</b> of the shareholders of the California corporation.  <small>Note: If the above box is not checked, a Certificate of Election to Wind Up and Dissolve (Form ELEC STK) must be filed prior to or together with this Certificate of Dissolution. (California Corporations Code section 1901.)</small></p>										
<p><b>4. Debts and Liabilities</b> (Check the applicable statement. Only one box may be checked. If second box is checked, must include the required information in an attachment.)</p> <p><input checked="" type="checkbox"/> The known debts and liabilities have been actually paid or paid as far as its assets permitted.  <input type="checkbox"/> The known debts and liabilities have been adequately provided for in full or as far as its assets permitted by their assumption. Included in the attachment to this certificate, incorporated herein by this reference, is a description of the provisions made and the name and address of the person, corporation or government agency that has assumed or guaranteed the payment, or the depository institution with which deposit has been made.  <input type="checkbox"/> The corporation never incurred any known debts or liabilities.</p>										
<p><b>5. Required Statements</b> (Do not alter the Required Statements – <b>ALL</b> must be true to file Form DISS STK.)</p> <p>a. The Corporation has been completely wound up and is dissolved.          b. All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.          c. The known assets have been distributed to the persons entitled thereto or the corporation acquired no known assets.</p>										
<p><b>6. Read, Verify, Date and Sign Below (See Instructions for signature requirements.)</b></p> <p>The undersigned is the sole director or a majority of the directors now in office. I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: left; padding-bottom: 10px;"> <u>10/15/18</u>            Date         </td> <td style="width: 60%; text-align: center; padding-bottom: 10px;">             Signature         </td> <td style="width: 20%; text-align: right; padding-bottom: 10px;">           Takehisa Naito            Type or Print Name         </td> </tr> <tr> <td style="text-align: left; vertical-align: top;">           Date         </td> <td style="text-align: center; vertical-align: top;">           Signature         </td> <td style="text-align: right; vertical-align: top;">           Type or Print Name         </td> </tr> <tr> <td style="text-align: left; vertical-align: top;">           Date         </td> <td style="text-align: center; vertical-align: top;">           Signature         </td> <td style="text-align: right; vertical-align: top;">           Type or Print Name         </td> </tr> </table>		<u>10/15/18</u> Date	 Signature	Takehisa Naito Type or Print Name	Date	Signature	Type or Print Name	Date	Signature	Type or Print Name
<u>10/15/18</u> Date	 Signature	Takehisa Naito Type or Print Name								
Date	Signature	Type or Print Name								
Date	Signature	Type or Print Name								

4258199

 <b>Secretary of State</b> <b>Statement and Designation by</b> <b>Foreign Corporation</b>	<b>S&amp;DC-S/N</b>
<b>IMPORTANT — Read Instructions before completing this form.</b>	
Must be submitted with a current Certificate of Good Standing issued by the government agency where the corporation was formed. See Instructions.	
<b>Filing Fee</b> — \$100.00 (for a foreign stock corporation) or \$30.00 (for a foreign nonprofit corporation)	
<b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00	
<b>Note:</b> Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a> .	

**FILED** *(Signature)*  
**Secretary of State**  
**State of California** *(Signature)*  
**MAR 22 2019**

*1P* This Space For Office Use Only

- 1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

Naito, Corp.	Nevada
--------------	--------

- 3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box 2780 South Jones Boulevard Suite 200-3132	City (no abbreviations) Las Vegas	State NV	Zip Code 89146
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State <b>CA</b>	Zip Code
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

- 4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** — Complete items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State <b>CA</b>	Zip Code

**CORPORATION** — Complete item 4c. Only include the name of the registered agent Corporation.

- c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 4a or 4b

**Business Filings Incorporated**

- 5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

*(Signature)*  
Signature

Takehisa Naito, President

Type or Print Name

4256199

## SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, NAITO, CORP., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 5, 2018, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0635



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****G587646****FILED**In the office of the Secretary of State  
of the State of California**APR-19 2019****1. CORPORATE NAME**

NAITO, CORP.

**2. CALIFORNIA CORPORATE NUMBER**

C4258199

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

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**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89146			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
--	------	-------	----------

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
---	------	-------	----------

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD SUITE 200-3132, LAS VEGAS, NV 89109				

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146				

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD SUITE 200-3133, LAS VEGAS, NV 89146				

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

BUSINESS CONSULTING

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 110



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****GC31551****FILED**In the office of the Secretary of State  
of the State of California**JAN-17 2020****1. CORPORATE NAME**

NAITO, CORP.

**2. CALIFORNIA CORPORATE NUMBER**

C4258199

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

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2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109			

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
--	------	-------	----------

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
---	------	-------	----------

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
TAKEHISA NAITO 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109				

8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109				

9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
KEISHI IKEDA 2780 SOUTH JONES BOULEVARD, STE 200-3132, LAS VEGAS, NV 89109				

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business****12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**

BUSINESS CONSULTING

**13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.**

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 111

2011 154549  
FILED  
Oct 23 2011Dana C. Crum, Realtor - Registered Agent  
Electronically signed by CARINA CLOUTIER

## YOUR RETURN MAILING ADDRESS

NAME: NAITO CORP  
 ADDRESS: 1930 WILSHIRE BLVD SUITE 400  
 CITY: LOS ANGELES STATE: CA ZIP CODE: 90057

**FICTITIOUS BUSINESS NAME STATEMENT**

## TYPE OF FILING AND FILING FEE (Check one)

- Original-\$26.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)  New Filings-\$26.00 (CHANGES IN FACTS FROM ORIGINAL FILING- REQUIRES PUBLICATION)  
 Refile-\$26.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)  
 \$5.00- FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION \$5.00- FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

The following person(s) is (are) doing business as:

## \*1. GEORGE PROMISE

\*\* 1930 WILSHIRE BLVD SUITE 400  
 Street address of principal place of business  
 LOS ANGELES CA 90057

City State Zip

Address or Incorporation or Organization Number (if applicable): A#ON C2900416

## 2. Print Fictitious Business Name(s)

1930 WILSHIRE BLVD SUITE 400

Mailing address if different

Los Angeles COUNTY LOS ANGELES CA 90057

City State Zip

## \*\*\* REGISTERED OWNER(S):

## 1. NAITO CORP

Full Name/Corp/LLC (P.O. Box not accepted)

1930 WILSHIRE BLVD SUITE 400

Residence Address

LOS ANGELES CA 90057

City State Zip

CALIFORNIA

If Corporation or LLC - Print State of Incorporation/Organization

## 3.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

## 2.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

## 4.

Full Name/Corp/LLC (P.O. Box not accepted)

Residence Address

City State Zip

If Corporation or LLC - Print State of Incorporation/Organization

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

## \*\*\*\* THIS BUSINESS IS CONDUCTED BY: (Check one)

- an Individual  a General Partnership  a Limited Partnership  a Limited Liability Company  
 an Unincorporated Association other than a Partnership  a Corporation  a Trust  Copartners  
 Husband and Wife  Joint Venture  State or Local Registered Domestic Partners  a Limited Liability Partnership

\*\*\*\*\* The registrant commenced to transact business under the fictitious business name or names listed above on 3/9/2007  
 (Insert N/A above if you haven't started to transact business)

I declare that all information in this statement is true and correct.  
 (A registrant who declares as true information which he or she knows to be false is guilty of a crime.)

REGISTRANT/CORP/LLC NAME (PRINT): NAITO CORP

TITLE CEO

REGISTRANT SIGNATURE

IF CORP OR LLC, PRINT NAME Kelshi Ikeda

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner.

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

DEAN C. LOGAN, LOS ANGELES COUNTY CLERK Deputy

# **ATTACHMENT E**

\*040104\*



**ROSS MILLER**  
 Secretary of State  
 204 North Carson Street, Suite 4  
 Carson City, Nevada 89701-4520  
 (775) 684-5708  
 Website: [www.nvsos.gov](http://www.nvsos.gov)

Filed in the office of 	Document Number <b>20140793930-58</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>12/04/2014 2:47 PM</b>
	Entity Number <b>E0608412014-3</b>

## Articles of Incorporation

(PURSUANT TO NRS CHAPTER 78)

(This document was filed electronically.)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

<b>1. Name of Corporation:</b>	KOTOBUKI MARKETING, INC.		
<b>2. Registered Agent for Service of Process:</b> (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: BUSINESS FILINGS INCORPORATED <small>Name</small> <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <b>OR</b> <input type="checkbox"/> Office or Position with Entity (name and address below)		
	<small>Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity</small> <small>Street Address</small> <input type="text"/> <small>City</small> <input type="text"/> <small>Nevada</small> <input type="text"/> <small>Zip Code</small> <small>Mailing Address (if different from street address)</small> <input type="text"/> <small>City</small> <input type="text"/> <small>Nevada</small> <input type="text"/> <small>Zip Code</small>		
<b>3. Authorized Stock:</b> (number of shares corporation is authorized to issue)	<small>Number of shares with par value:</small> <input type="text"/> 2000	<small>Par value per share:</small> \$ <input type="text"/> 0.01	<small>Number of shares without par value:</small> <input type="text"/> 0
<b>4. Names and Addresses of the Board of Directors/Trustees:</b> (each Director/Trustee must be a natural person at least 18 years of age; attach additional page if more than two directors/trustees)	1) <input type="text"/> TAKEHISA NAITO <small>Name</small> <small>Street Address</small> <input type="text"/> <small>City</small> <input type="text"/> <small>NV</small> <input type="text"/> <small>Zip Code</small> 2) <input type="text"/> <small>Name</small> <small>Street Address</small> <input type="text"/> <small>City</small> <input type="text"/> <small>State</small> <input type="text"/> <small>Zip Code</small>		
<b>5. Purpose:</b> (optional; required only if Benefit Corporation status selected)	<i>The purpose of the corporation shall be:</i> ANY LEGAL PURPOSE		
	<b>6. Benefit Corporation:</b> (see instructions) <input type="checkbox"/> Yes		
<b>7. Name, Address and Signature of Incorporator:</b> (attach additional page if more than one incorporator)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. TAKEHISA NAITO <small>Name</small> <small>Address</small> <input type="text"/> <small>City</small> <input type="text"/> <small>NV</small> <input type="text"/> <small>Zip Code</small>		
<b>8. Certificate of Acceptance of Appointment of Registered Agent:</b>	<i>I hereby accept appointment as Registered Agent for the above named Entity.</i> X BUSINESS FILINGS INCORPORATED <small>Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity</small> <input type="text"/> <small>Date</small> 12/4/2014		

This form must be accompanied by appropriate fees.

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF  TO 

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form.**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.



\*100101\*

Filed in the office of 	Document Number <b>20140798308-12</b>
Ross Miller Secretary of State State of Nevada	Filing Date and Time <b>12/08/2014 4:46 PM</b>
Entity Number <b>E0608412014-3</b>	

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3827 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
NAME KEISHI IKEDA	TITLE(S) DIRECTOR		
ADDRESS 2780 S. JONES BLVD., SUITE 200-3828 , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89146

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Title  
PRESIDENT

Date  
12/8/2014 4:46:12 PM

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised 7-31-13

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2015 TO DEC, 2016

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form.**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number <b>E0608412014-3</b>
Secretary	Filing Number <b>20150521999-33</b>
State Of Nevada	Filed On <b>11/30/2015</b>
	Number of Pages <b>1</b>

(This document was filed electronically.)

ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>		

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Title  
**PRESIDENT**

Date  
**11/30/2015 2:10:21 PM**

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised: 7-1-15

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

ENTITY NUMBER

KOTOBUKI MARKETING, INC.

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2016 TO DEC, 2017

\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT: Read instructions before completing and returning this form.**

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An **Officer** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

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Filed in the Office of <i>Barbara K. Legarske</i>	Business Number <b>E0608412014-3</b>
Secretary	Filing Number <b>20160500103-98</b>
State Of Nevada	Filed On <b>11/16/2016</b>
	Number of Pages <b>1</b>

(This document was filed electronically.)

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**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

- This corporation is a publicly traded corporation. The Central Index Key number is:

- This publicly traded corporation is not required to have a Central Index Key number.

**NRS 76.020 Exemption Codes**

- 001 - Governmental Entity  
005 - Motion Picture Company  
006 - NRS 680B.020 Insurance Co.

NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>PRESIDENT (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>SECRETARY (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>KEISHI IKEDA</b>	TITLE(S) <b>TREASURER (OR EQUIVALENT OF)</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3828 , USA</b>	CITY <b>LAS VEGAS</b>		
NAME <b>TAKEHISA NAITO</b>	TITLE(S) <b>DIRECTOR</b>	STATE <b>NV</b>	ZIP CODE <b>89146</b>
ADDRESS <b>2780 S. JONES BLVD., SUITE 200-3827 , USA</b>	CITY <b>LAS VEGAS</b>		

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Title  
**PRESIDENT** Date  
**11/16/2016 7:22:47 AM**

**Signature of Officer or  
Other Authorized Signature**

Nevada Secretary of State List Profit  
Revised: 7-1-15

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

KOTOBUKI MARKETING, INC.

NAME OF CORPORATION

ENTITY NUMBER

E0608412014-3

FOR THE FILING PERIOD OF DEC. 2016 TO DEC. 2017



\*100103\*

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- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

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7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number E0608412014-3
Secretary	Filing Number 20170199622-89
State Of Nevada	Filed On 05/05/2017
	Number of Pages 1

(This document was filed electronically.)

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## CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

## NRS 76.020 Exemption Codes

001 - Governmental Entity

005 - Motion Picture Company

006 - NRS 680B.020 Insurance Co.

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

This corporation is a publicly traded corporation. The Central Index Key number is:

This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 1619 N. LA BREA AVE. APT 614	CITY HOLLYWOOD	STATE CA	ZIP CODE 90028
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 8760 W. PATRICK LN. UNIT 2016	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 8760 W. PATRICK LN. UNIT 2016	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 1619 N. LA BREA AVE. APT 614	CITY LOS ANGELES	STATE CA	ZIP CODE 90028

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

KEISHI IKEDA

Title

SECRETARY

Date

5/5/2017 9:21:33 AM

**Signature of Officer or  
Other Authorized Signature**

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

KOTOBUKI MARKETING, INC.

ENTITY NUMBER

E0608412014-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF

DEC, 2017

TO

DEC, 2018



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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2. If there are additional officers, attach a list of them to this form.

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7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number E0608412014-3
Secretary	Filing Number 20170432025-16
State Of Nevada	Filed On 10/11/2017
	Number of Pages 1

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

## CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

 Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 

## NRS 76.020 Exemption Codes

001 - Governmental Entity  
006 - NRS 680B.020 Insurance Co.**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.** This corporation is a publicly traded corporation. The Central Index Key number is:  This publicly traded corporation is not required to have a Central Index Key number: 

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)		
ADDRESS 7430 YONIE COURT	CITY LAS VEGAS	STATE NV	ZIP CODE 89117
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)		
ADDRESS 8760 W. PATRICK LN. UNIT 2016	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)		
ADDRESS 8760 W. PATRICK LN. UNIT 2016	CITY LAS VEGAS	STATE NV	ZIP CODE 89148
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR		
ADDRESS 7430 YONIE COURT	CITY LAS VEGAS	STATE NV	ZIP CODE 89117

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

 TAKEHISA NAITOTitle  
PRESIDENT  
Date  
10/11/2017 1:36:04 PM**Signature of Officer or  
Other Authorized Signature**Nevada BX10/11/19 Date List Profit  
Form: 100103 Revised: 7-1-17

## (PROFIT) INITIAL ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS

## LICENSE APPLICATION OF:

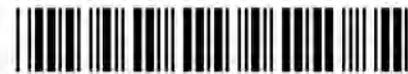
KOTOBUKI MARKETING, INC.

NAME OF CORPORATION

FOR THE FILING PERIOD OF DEC, 2018 TO DEC, 2019

ENTITY NUMBER

E0608412014-3



\*100103\*

USE BLACK INK ONLY - DO NOT HIGHLIGHT

**\*\*YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov)\*\***

- Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**

2. If there are additional officers, attach a list of them to this form.

3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.

4. State business license fee is \$500.00/\$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.

5. Make your check payable to the Secretary of State.

6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.

8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

Filed in the Office of <i>Barbara K. Cegarske</i>	Business Number E0608412014-3
Secretary	Filing Number 20180431714-51
State Of Nevada	Filed On 10/02/2018
	Number of Pages 1

(This document was filed electronically.)  
ABOVE SPACE IS FOR OFFICE USE ONLY

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

- Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NRS 76.020 Exemption Codes**

001 - Governmental Entity  
006 - NRS 680B.020 Insurance Co.

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

- This corporation is a publicly traded corporation. The Central Index Key number is: \_\_\_\_\_

- This publicly traded corporation is not required to have a Central Index Key number.

NAME TAKEHISA NAITO	TITLE(S) PRESIDENT (OR EQUIVALENT OF)	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
ADDRESS 2780 S. JONES BLVD. #200-3132				
NAME KEISHI IKEDA	TITLE(S) SECRETARY (OR EQUIVALENT OF)	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
ADDRESS 2780 S. JONES BLVD. #200-3133				
NAME KEISHI IKEDA	TITLE(S) TREASURER (OR EQUIVALENT OF)	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
ADDRESS 2780 S. JONES BLVD. #200-3133				
NAME TAKEHISA NAITO	TITLE(S) DIRECTOR	CITY LAS VEGAS	STATE NV	ZIP CODE 89146
ADDRESS 2780 S. JONES BLVD. #200-3132				

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

TAKEHISA NAITO

Title

PRESIDENT

Date

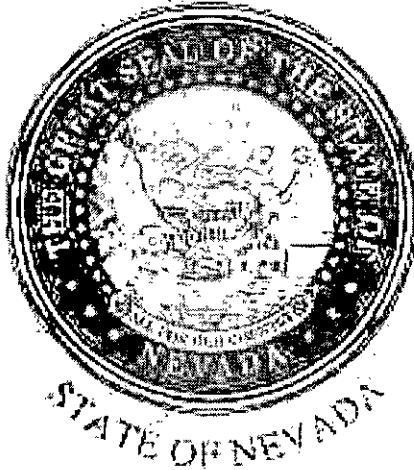
10/2/2018 8:48:56 AM

**Signature of Officer or  
Other Authorized Signature**

Nevada BX120 Date List Profit  
Form: 100103 Revised: 7-1-17

S&DC-S/N	Statement and Designation by Foreign Corporation
<p>To qualify a corporation from another state or country to transact intrastate business in California, fill out this form, and submit for filing along with:</p> <ul style="list-style-type: none"> <li>- A \$100 filing fee (for a foreign stock corporation) or \$30 filing fee (for a foreign nonprofit corporation), and</li> <li>- A certificate of good standing, issued within the last six (6) months by the agency where the corporation was formed. Note: If the corporation is a nonprofit, the certificate of good standing also must indicate the corporation is a nonprofit or nonstock corporation.</li> <li>- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.</li> </ul> <p><b>Important!</b> Corporations in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <a href="https://www.ftb.ca.gov">https://www.ftb.ca.gov</a>.</p>	
<span style="font-size: 1.5em;">FILED</span> <span style="margin-left: 10px;">Secretary of State State of California</span> <span style="margin-left: 10px;">JUL 13 2016</span> <span style="margin-left: 10px;">PMV</span> <span style="margin-left: 10px;">IPC</span> <span style="margin-left: 10px;">This Space For Office Use Only</span>	
<p>For questions about this form, go to <a href="http://www.sos.ca.gov/business/be/filing-tips.htm">www.sos.ca.gov/business/be/filing-tips.htm</a>.</p>	
<p><b>Corporate Name</b> (List the exact name of the corporation, as shown in the certificate of good standing. If the name of the corporation is not available for use in the State of California, the corporation must qualify under an assumed name. E.g., "[list the exact name] which will do business in California as [list the proposed assumed name]." For general corporate name requirements and restrictions in California, go to <a href="http://www.sos.ca.gov/business/be/name-availability.htm">www.sos.ca.gov/business/be/name-availability.htm</a>.)</p> <p>① Kotobuki Marketing, Inc.</p>	
<p><b>Corporate History</b></p> <p>② State or foreign country where this corporation was formed: Nevada</p>	
<p><b>Service of Process</b> (List a California resident or a California registered corporate agent that agrees to be your agent to accept service of process in case your corporation is sued. You may list any adult who lives in California. You may <b>not</b> list your own corporation as the agent. Do not list an address if the agent is a California registered corporate agent as the address for service of process is already on file.)</p> <p>③ a. Business Filings Incorporated</p> <p>Agent's Name _____ CA _____    b. Agent's Street Address (if agent is <b>not</b> a corporation) - Do not list a P.O. Box City (no abbreviations) State Zip _____    The corporation named in Item 1 above irrevocably consents to service of process directed to it upon the agent designated above, and to service of process on the California Secretary of State if that agent or that agent's successor is no longer authorized to act or cannot be found at the address given.</p>	
<p><b>Corporate Addresses</b></p> <p>④ a. 2780 S. Jones Blvd. Suite 200-3827, Las Vegas, Nevada 89146    Street Address of Principal Executive Office - Do not list a P.O. Box City (no abbreviations) State Zip _____    b. Street Address of Principal Office in California, if any - Do not list a P.O. Box City (no abbreviations) State Zip _____    c. Mailing Address of Principal Executive Office, if different from 4a or 4b City (no abbreviations) State Zip _____</p>	
<p><b>Read and sign below:</b> This form must be signed by an officer of the foreign corporation.</p> <p>Sign here _____ Takehisa Naito _____ President _____    Print your name here _____ Your officer title _____</p>	
<p>Make check/money order payable to: <b>Secretary of State</b></p> <p>Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.</p>	

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **KOTOBUKI MARKETING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 4, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 12, 2016.

A handwritten signature in black ink that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE  
Secretary of State

Electronic Certificate

Certificate Number: C20160712-0094

You may verify this electronic certificate  
online at <http://www.nvsos.gov/>



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY STATE ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY CITY STATE ZIP CODE

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4 CITY STATE ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ ADDRESS CITY STATE ZIP CODE

8. SECRETARY ADDRESS CITY STATE ZIP CODE

9. CHIEF FINANCIAL OFFICER/ ADDRESS CITY STATE ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 123

4258200



**Secretary of State  
Statement and Designation by  
Foreign Corporation**

S&amp;DC-S/N

**IMPORTANT — Read Instructions before completing this form.**

Must be submitted with a current Certificate of Good Standing issued by the government agency where the corporation was formed. See Instructions.

**Filing Fee** — \$100.00 (for a foreign stock corporation) or  
\$30.00 (for a foreign nonprofit corporation)

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov>.

**FILED**

Secretary of State  
State of California

MAR 22 2019

VPC

This Space For Office Use Only

- 1. Corporate Name** (Go to [www.sos.ca.gov/business/be/name-availability](http://www.sos.ca.gov/business/be/name-availability) for general corporate name requirements and restrictions.)

- 2. Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Kotobuki Marketing, Inc.	Nevada
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**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box 2780 S. Jones Blvd. Suite 200-3827	City (no abbreviations) Las Vegas	State NV	Zip Code 89146
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either individual OR Corporation.)

INDIVIDUAL — Complete items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION — Complete item 4c. Only include the name of the registered agent Corporation.

- c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 4a or 4b

Business Filings Incorporated

**5. Read and Sign Below** (See instructions. Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Takehisa Naito, President

Type or Print Name

4258200

**SECRETARY OF STATE**

**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **KOTOBUKI MARKETING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 4, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2019.

  
*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20190321-0427



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****G588084****FILED**In the office of the Secretary of State  
of the State of California**APR-19 2019****1. CORPORATE NAME**

KOTOBUKI MARKETING, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258200

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 2780 S. JONES BLVD. SUITE 200-3827, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
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5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
--	------	-------	----------

6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
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**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
---	---	------	-------	----------

8. SECRETARY KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
------------------------------	--	------	-------	----------

9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
---	--	------	-------	----------

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

**10. NAME OF AGENT FOR SERVICE OF PROCESS**

BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
--	------	-------	----------

**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

CUSTOMER SERVICE CALL CENTER

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

04/19/2019

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 126



F

# State of California Secretary of State

## Statement of Information

(Foreign Corporation)

**FEES (Filing and Disclosure): \$25.00.**

If this is an amendment, see instructions.

**IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

GC32918

**FILED**In the office of the Secretary of State  
of the State of California**JAN-17 2020****1. CORPORATE NAME**

KOTOBUKI MARKETING, INC.

**2. CALIFORNIA CORPORATE NUMBER**

C4258200

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 13.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 101 CONVENTION CENTER DRIVE STE 500, LAS VEGAS, NV 89109	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 11 must be left blank.

## 10. NAME OF AGENT FOR SERVICE OF PROCESS

BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED

11. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

## 12. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

CUSTOMER SERVICE CALL CENTER

## 13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

01/17/2020

TAKEHISA NAITO

PRESIDENT

DATE

TYPE/PRINT NAME OF PERSON COMPLETING FORM

TITLE

SIGNATURE

SI-350 (REV 01/2013)

APPROVED BY SECRETARY OF STATE

PX19 - 127



**Secretary of State  
Certificate of Surrender  
(Foreign Qualified Corporation ONLY)**

SURC

**IMPORTANT — Read Instructions before completing this form.**

There is **No Fee** for filing a Certificate of Surrender

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

**Note:** For information about Franchise Tax Board final tax return requirements,  
go to <https://www.ftb.ca.gov>.

**FILED** *mh*

Secretary of State  
State of California

OCT 26 2017  
*IPC*

This Space For Office Use Only

**1. Corporate Name** (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

Kotobuki Marketing, Inc.

**2. 7-Digit Secretary of State File Number**

**3. Jurisdiction** (State, foreign country or place where this corporation is formed.)

C3926730

Nevada

**4. Mailing Address to mail copies of Legal Service** (Enter the complete mailing address where the California Secretary of State may forward copies of any legal documents against the corporation that are served on the Secretary of State intended for the corporation.)

Mailing Address of Corporation	City (no abbreviations)	State	Zip Code
2780 S. Jones Blvd. Suite 200-3827	Las Vegas	NV	89146

**5. Required Statements** (Do not alter the Required Statements – ALL must be true to file this Certificate of Surrender.)

Statements 5(a) – 5(d) are true:

- a) The corporation hereby surrenders its rights and authority to transact intrastate business in the State of California.
- b) The corporation hereby revokes its designation of agent for service of process in California.
- c) The corporation consents to process against it in any action upon any liability or obligation incurred within the State of California prior to the filing of this Certificate of Surrender may be served upon the California Secretary of State.
- d) All final returns required under the California Revenue and Taxation Code have been or will be filed with the California Franchise Tax Board.

**6. Read and Sign Below (See Instructions. Office or title not required.)**

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Keishi Ikeda, Secretary

Type or Print Name

Clark County / Business License / BL Search



## Business License



### Business License Detail Information

<b>License Number:</b>	2003119.056-101
<b>MJBL Number:</b>	
<b>Business:</b>	Kotobuki Marketing, Inc. Suite 500 101 Convention Center Dr Las Vegas, NV 89109
<b>Business Telephone:</b>	(213) 503-6707
<b>License Category:</b>	Admin & Support Services - Group 1
<b>Status:</b>	Licensed
<b>Date of License:</b>	04/18/2017
<b>Out of Business Date:</b>	
<b>Business Owner(s)</b>	
Ikeda, Keishi Naito, Takehisa	

[Return to Previous Page](#)  
[Return to Business License Database Search Options](#)

# **ATTACHMENT F**

**MAR 03 2010****ARTICLES OF INCORPORATION**

of

EBISU MARKETING, CORP.

**ARTICLE I**

The name of this corporation is EBISU MARKETING, CORP..

**ARTICLE II**

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

**ARTICLE III**

The name and address in the State of California of this corporation's initial agent for service of process is: GERALD K. KITANO, 3435 Wilshire Blvd., Suite 1800, Los Angeles, California 90010.

**ARTICLE IV**

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is ONE HUNDRED THOUSAND (100,000)

**ARTICLE V**

The liability of the Directors of this corporation for monetary damages in any action brought by or in the right of their corporation for breach of a Director's duties to the corporation and its shareholders is eliminated to the fullest extent permissible under California law.

**ARTICLE VI**

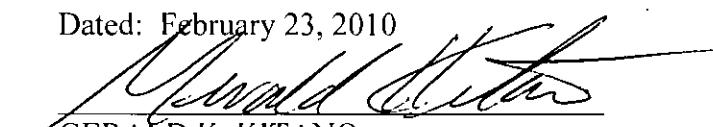
This corporation is authorized to provide indemnification of agents (as defined in Section 317 of the California Corporations Code) for breach of duty to the corporation and its stockholders through bylaw provisions or through agreement with the agent, or both, in excess of the indemnification otherwise permitted by Section 317 of the Corporations

Code, subject to the limits on such excess indemnification set forth in Section 204 of said Code.

#### ARTICLE VII

If proceedings for the dissolution of this corporation to which California Corporations Code Section 2000 applies are instituted, the provisions of any Buy-sell or similar shareholders agreement then in effect shall govern and supersede any provisions of Section 2000 inconsistent therewith, to the extent required to enforce said agreement.

Dated: February 23, 2010



GERALD K. KITANO  
Incorporator



**State of California  
Secretary of State**

**S****E-E34937****FILED**In the office of the Secretary of  
State of the State of California**Mar - 17 2011**

This Space For Filing Use Only

**Statement of Information**

(Domestic Stock and Agricultural Cooperative Corporations)

**FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.****IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM****1. CORPORATE NAME**

C3277399

EBISU MARKETING, CORP.

**Due Date:****Complete Addresses for the Following (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)**

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD. #400	CITY LOS ANGELES CA 90057	STATE	ZIP CODE
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
4. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)**

5. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 6260 W. 3RD STREET #407	CITY LOS ANGELES, CA 90036	STATE	ZIP CODE
6. SECRETARY TAKEHISA NAITO	ADDRESS 6260 W. 3RD STREET #407	CITY LOS ANGELES, CA 90036	STATE	ZIP CODE
7. CHIEF FINANCIAL OFFICER/ TAKEHISA NAITO	ADDRESS 6260 W. 3RD STREET #407	CITY LOS ANGELES CA 90036	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)**

8. NAME TAKEHISA NAITO	ADDRESS 6260 W. 3RD STREET #407	CITY LOS ANGELES, CA 90036	STATE	ZIP CODE
9. NAME KEISHI IKEDA	ADDRESS	CITY	STATE	ZIP CODE
10. NAME KEISHI IKEDA	ADDRESS	CITY	STATE	ZIP CODE

**11. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

**Agent for Service of Process** (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California street address (a P.O.Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.)

**12. NAME OF AGENT FOR SERVICE OF PROCESS**

KEISHI IKEDA

13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL 1930 WILSHIRE BLVD. #400	CITY LOS ANGELES, CA 90057	STATE	ZIP CODE
--	-------------------------------	-------	----------

**Type of Business**

14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION MARKETING
---

15. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

03/17/2011	TAKEHISA NAITO	C.E.O.	
DATE	TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM	TITLE	SIGNATURE



**State of California  
Secretary of State**

**S****E-K34259****FILED**In the office of the Secretary of State  
of the State of California**Mar - 29 2012**

This Space For Filing Use Only

**Statement of Information**  
(Domestic Stock and Agricultural Cooperative Corporations)  
**FEES (Filing and Disclosure): \$25.00.** If amendment, see instructions.  
**IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**1. CORPORATE NAME**

C3277399  
EBISU MARKETING, CORP.

1930 WILSHIRE BLVD. #400  
LOS ANGELES, CA 90057

**Due Date:****No Change Statement ( Not applicable if agent address of record is a P.O. Box address. See instructions.)**

**2**  If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 16.

If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement has been previously filed, this form must be completed in its entirety.

**Complete Addresses for the Following (Do not abbreviate the name of the city. Items 3 and 4 cannot be P.O. Boxes.)**

3. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
5. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 3	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)**

6. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
7. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
8. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)**

9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE

**12. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

**Agent for Service of Process** (If the agent is an individual, the agent must reside in California and Item 14 must be completed with a California street address (a P.O. Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 14 must be left blank.)

**13. NAME OF AGENT FOR SERVICE OF PROCESS**

14. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
		CA	

**Type of Business****15. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION**

**16. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.**

03/29/2012

KEISHI IKEDA

CFO

DATE

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

TITLE

SIGNATURE

18-641299

	<b>Secretary of State Statement of Information</b> (California Stock, Agricultural Cooperative and Foreign Corporations)	SI-550 <b>2</b>
<b>IMPORTANT — Read instructions before completing this form.</b>		
<b>Fees (Filing plus Disclosure) — \$25.00;</b>		
<b>Copy Fees</b> — First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees		
<p><b>1. Corporation Name</b> (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)</p> <p><b>EBISU MARKETING, CORP.</b></p>		

**FILED**  
**Secretary of State**  
**State of California**

JUL 11 2018

**1.50/NF/PC**  
*This Space For Office Use Only*

**2. 7-Digit Secretary of State File Number**  
C3277399

**3. Business Addresses**

a. Street Address of Principal Executive Office - Do not list a P.O. Box <b>1930 Wilshire Blvd Suite 400</b>	City (no abbreviations) <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90057</b>
b. Mailing Address of Corporation, if different than Item 3a	City (no abbreviations)	State	Zip Code
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box	City (no abbreviations)	State <b>CA</b>	Zip Code

**4. Officers**

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>	First Name	Middle Name	Last Name <b>Naito</b>	Suffix
			City (no abbreviations) <b>Hollywood</b>	State <b>CA</b> Zip Code <b>90028</b>
b. Secretary/ <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>	First Name	Middle Name	Last Name <b>Naito</b>	Suffix
			City (no abbreviations) <b>Hollywood</b>	State <b>CA</b> Zip Code <b>90028</b>
c. Chief Financial Officer/ <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>	First Name	Middle Name	Last Name <b>Naito</b>	Suffix
			City (no abbreviations) <b>Hollywood</b>	State <b>CA</b> Zip Code <b>90028</b>

**5. Director(s)**

California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).

a. First Name <b>Takehisa</b> Address <b>1619 N. La Brea Ave., #614</b>	Middle Name	Last Name <b>Naito</b>	Suffix
		City (no abbreviations) <b>Hollywood</b>	State <b>CA</b> Zip Code <b>90028</b>
b. Number of vacancies on the Board of Directors, if any			

**6. Service of Process (Must provide either Individual OR Corporation.)**

INDIVIDUAL — Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State <b>CA</b>	Zip Code

CORPORATION — Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b

**C2113485**

**Business Filings Incorporated****7. Type of Business**

Describe the type of business or services of the Corporation

**Customer Service**

**8. The information contained herein, including in any attachments, is true and correct.**

July 10, 2018

Takehisa Naito

Date

Type or Print Name of Person Completing the Form

CEO

Title

Signature

SI-550 (REV 01/2017)

**Clear Form****Print Form**

1/2

2017 California Secretary of State  
www.sos.ca.gov/business/be

Attachment to Statement of Information  
**EBISU MARKETING, CORP.**

4. Officers:

Vice President: Takehisa Naito, 1619 N. La Brea Ave., #614, Hollywood, California 90028

2/2



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

### Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE
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# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

**1. CORPORATE NAME**

EBISU MARKETING, CORP.

GC32906

**FILED**In the office of the Secretary of State  
of the State of California

JAN-17 2020

**2. CALIFORNIA CORPORATE NUMBER**

C3277399

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
8. SECRETARY TAKEHISA NAITO	ADDRESS 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ TAKEHISA NAITO	ADDRESS 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME TAKEHISA NAITO	ADDRESS 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

**13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED			
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE

**Type of Business**

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
CUSTOMER SERVICE

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

01/17/2020      TAKEHISA NAITO      PRESIDENT  
 DATE      TYPE/PRINT NAME OF PERSON COMPLETING FORM      TITLE

SIGNATURE

138

# **ATTACHMENT G**

0541552

## ARTICLES OF INCORPORATION

### Article I

The name of the corporation is: Hotei Marketing, Inc.

*Emr*  
FILED  
Secretary of State  
State of California

MAR 06 2013

*(cc)*

### Article II

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

### Article III

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

### Article IV

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

### Article V

The initial business and mailing address of the corporation is: 1930 Wilshire Blvd Suite 400, Los Angeles, California 90057

### Article VI

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator

*Mark Williams*

BY: Mark Williams, A.V.P.



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

### Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE
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# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

**1. CORPORATE NAME**

HOTEI MARKETING, INC.

GC31950

**FILED**In the office of the Secretary of State  
of the State of California

JAN-17 2020

**2. CALIFORNIA CORPORATE NUMBER**

C3541552

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

**13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:**

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS BUSINESS FILINGS INCORPORATED WHICH WILL DO BUSINESS IN CALIFORNIA AS DELAWARE BUSINESS FILINGS INCORPORATED
15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**
16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MARKETING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

01/17/2020	TAKEHISA NAITO	PRESIDENT	SIGNATURE
DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SI-200 (REV 01/2013)

Page 1 of 1 APPROVED BY SECRETARY OF STATE

# **ATTACHMENT H**

**ARTICLES OF INCORPORATION****Article I**

The name of the corporation is: Daikoku Marketing, Inc.

**FILED**  
**Secretary of State**  
**State of California**

APR 30 2013

1 cc

**Article II**

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

**Article III**

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is two thousand (2,000), with a one cent (\$0.01) par value per share.

**Article IV**

The name in the State of California of this corporation's initial agent for service of process is:

Business Filings Incorporated

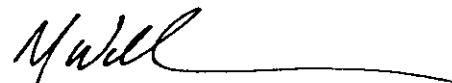
**Article V**

The initial business and mailing address of the corporation is: 1930 Wilshire Blvd Suite 400, Los Angeles, California 90057

**Article VI**

The liability of the directors of the corporation for monetary damages shall be eliminated to the fullest extent permissible under California law.

Business Filings Incorporated, Incorporator



BY: Mark Williams, A.V.P.



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

2. CALIFORNIA CORPORATE NUMBER

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

3. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 17.

#### Complete Addresses for the Following (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**Agent for Service of Process** If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.

14. NAME OF AGENT FOR SERVICE OF PROCESS

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

#### Type of Business

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE	TYPE/PRINT NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE
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# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

DAIKOKU MARKETING, INC.

G440170

**FILED**In the office of the Secretary of State  
of the State of California

FEB-26 2019

2. CALIFORNIA CORPORATE NUMBER

C3560767

This Space for Filing Use Only

**No Change Statement** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

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**Complete Addresses for the Following** (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY 1930 WILSHIRE BLVD SUITE 400, LOS ANGELES, CA 90057	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers** (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

7. CHIEF EXECUTIVE OFFICER/ TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
8. SECRETARY KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ KEISHI IKEDA	ADDRESS 2780 SOUTH JONES BLVD., SUITE 200-3133, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE

**Names and Complete Addresses of All Directors, Including Directors Who are Also Officers** (The corporation must have at least one director. Attach additional pages, if necessary.)

10. NAME TAKEHISA NAITO	ADDRESS 2780 SOUTH JONES BLVD. SUITE 200-3132, LAS VEGAS, NV 89146	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE
12. NAME	ADDRESS	CITY	STATE	ZIP CODE

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14. NAME OF AGENT FOR SERVICE OF PROCESS  
BUSINESS FILINGS INCORPORATED

15. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

**Type of Business**

16. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  
MARKETING

17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

02/26/2019 TAKEHISA NAITO PRESIDENT  
DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM TITLE SIGNATURE 147



# State of California Secretary of State

S

## Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00.

If this is an amendment, see instructions.

### IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

#### 1. CORPORATE NAME

DAIKOKU MARKETING, INC.

GC83845

**FILED**In the office of the Secretary of State  
of the State of California

FEB-04 2020

#### 2. CALIFORNIA CORPORATE NUMBER

C3560767

This Space for Filing Use Only

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#### Type of Business

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02/04/2020      TAKEHISA NAITO      PRESIDENT  
 DATE      TYPE/PRINT NAME OF PERSON COMPLETING FORM      TITLE

SIGNATURE